## IN THE PROBATE COURT OF CHAMBERS COUNTY, ALABAMA

IN RE:	,
a person alleged to be in need of commitment to the Alabama State Department of Mental Health or such other public facility as the Court may order	Case No: ) D/O/B )
TO THE HONORABLE PAUL STORY, JUDO	GE OF SAID COURT:
Now comes	and respectfully shows unto the
Court as follows:	
1. That he/she is	of, who
is currently a resident at	
2. That the name and address of legal cou	nsel for
is: None.	
	r of
is: (name):	
(relationship)	*
(address)	
(phone number)	and that the Petitioner truly
	is mentally ill and in
	of the Alabama State Department of Mental Health at a
state mental health facility or at a designa	ated mental health facility as the Court may order; that
	refuses to seek treatment voluntarily and is
incapable of governing himself/herself in	this matter; that it would be to his/her best interest to
be committed to the custody of the Ala	abama State Department of Mental Health at a state
mental health facility or at a designated n	nental health facility as the Court may order for his/her
	er shown that he/she poses a real and present threat of
	ners, and will, if not treated, continue to suffer mental
distress and will continue to experience	deterioration of the ability to function independently.

The said	is unable to make a rational and
informed decision as to whether or not treatment for menta	
Petitioners further avers that the said	does
pose a substantial real and present threat of immediate harm	
limitations should be placed on his/her liberty pending hearing in t	his cause.
The names and addresses of other people with knowledge	of his/her mental illness who may be
called as witnesses are as follows:	
Name:	
Address:	
Phone No:	
Name:	
Address:	
Phone No:	
THE PREMISES CONSIDERED, your Petitioner prays	that this Honorable Court will take
jurisdiction of this petition and appoint a day for the hearing thereo	of and, if
is not represented by counsel, wi	ll appoint a Guardian ad Litem to
represent and defend her, and upon a hearing and affirmative det	ermination that the Court will make
and enter a decree declaring the said	to be in need of
the care, restraint and treatment of the Alabama State Department	t of Mental Health at a state mental
health facility as the Court may order, and will commit him/her to	the custody of the same.
Done this day of,	·
Petitioner	
Phone #:	

STATE OF ALABAMA	)
CHAMBERS COUNTY	)
Before me, the unde	ersigned authority in and for said county and state personally appeared, who being duly sworn, deposes and says
that he/she has knowledge a	and things stated; and to the best of his/her knowledge, information and
belief that matters contained	d therein are true and correct.
Sworn to and subsc	Petitioner ribed before me on this day of,
	Notary Public
	Commission Expiration Date

Testimony of Petitioner(s) regarding behavior of:		_
		_
Does Mental Respondent have insurance coverage:		
If yes, specify insurance carrier:		
Signed this day of	, 20	
Petitioner	Petitioner	_