

# Request for Accommodation

1. Information about the court case or activity

What is the Case Number? \_\_\_\_\_.

What is the Case Name? \_\_\_\_\_.

If there is no specific case, what is the court activity?

\_\_\_\_\_.

2. Information about the Person Requesting Accommodation.

What is your name? \_\_\_\_\_.

3. Describe the court/clerk proceeding or activity you need accommodation for. Include the date, time, and location:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

4. How are you participating in a court/clerk proceeding/activity (check all that apply):

- Party                       Attorney                       Witness  
 Juror                       Observer                       Other \_\_\_\_\_

5. Describe the disability for which you are requesting an accommodation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

6. Describe what accommodation you are requesting and explain why this specific accommodation is necessary.

---

---

---

7. Provide any information that you think would help the court/clerk respond to your request.

---

---

8. Contact information:

Email \_\_\_\_\_.

Mailing address \_\_\_\_\_.

Telephone where the court can leave a message \_\_\_\_\_.

Other (specify): \_\_\_\_\_.

What is the best way to notify you about the decision on your request?

email  mail  phone call  other (see above).

Date: \_\_\_\_\_



\_\_\_\_\_  
*(Signature of Person Requesting Accommodation)*

\_\_\_\_\_  
*(Print Name of Person Requesting Accommodation)*

**Return this form to the Court Contact:**

Fona Sugg  
Superior Court Administrator  
Fona.Sugg@co.chelan.wa.us  
509-667-6210  
401 Washington St, Wenatchee, WA 98801