

STATE OF NEW JERSEY

\_\_\_\_\_ COURT  
COUNTY OF \_\_\_\_\_

IN RE THE MATTER OF: \_\_\_\_\_

**TEMPORARY ORDER FOR INVOLUNTARY COMMITMENT TO  
TREATMENT OF AN ADULT (INPATIENT TREATMENT)**

This matter having being brought before the Court on this \_\_\_\_\_  
day of \_\_\_\_\_, 20 \_\_\_\_\_ for a Temporary Order for Commitment to  
Treatment pursuant to *N.J.S.A. 30:4-27.10(a)*, specifically seeking the involuntary commitment  
of \_\_\_\_\_, an adult (herein referred to as “patient”)  
to inpatient treatment; and

The two necessary clinical/screening certificates having been presented to the court in the  
form required by *N.J.S.A. 30:4-27(b)* and *R.4:74-7(b)*; and

The court, upon review of the documents received, finding there to be probable cause to  
believe that the above named patient is in need of involuntary commitment to treatment in  
accordance with the standard set forth in *N.J.S.A. 30:4-27.2(m)*;

IT IS on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

ORDERED that:

1. The above named patient be involuntarily committed to treatment and admitted to  
\_\_\_\_\_, unless an alternative placement is provided  
pursuant to the authority of the Commissioner of Human Services pending a court hearing with  
respect to the issue of continuing need for involuntary commitment to treatment, said hearing be  
conducted within 20 days from the initial commitment; and

2. The court hearing (referred to in paragraph 1, above) is hereby scheduled for \_\_\_\_\_ am/pm on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ at \_\_\_\_\_; and  
(location)

3. County Counsel \_\_\_\_\_ is hereby assigned to present, at said hearing, the case for continuing involuntary commitment to treatment; and

4. The following attorney is hereby assigned to represent the patient:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_;

5. Notice of the time, date and location of the above scheduled hearing shall be served, no less than 10 days prior to hearing date, upon the patient, patient's counsel, patient's guardian (if any), county counsel referred to herein, and patient's nearest relatives (include addresses):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The county adjuster of the county in which the patient has legal settlement, the director, chief executive officer or other individual having custody of the patient and the following individuals (include addresses):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_;

6. The notice (referred to in paragraph 5, above) shall be served upon the patient, patient's guardian (if any) and patient's counsel and shall include a copy of this Order, a statement of patient's rights at the court hearing (*N.J.S.A. 30:4-27.14*) and the screening and/or clinical certificates and any other documents submitted in support of patient's involuntary commitment; and

7. Service upon the patient shall be by personal service, all other persons specified herein to receive notice shall be served by \_\_\_\_\_  
(mode of service)

with the following exceptions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ ; and

It is further ordered that \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Judge Signature

\_\_\_\_\_  
Print or Stamp Judge Name