

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA AT _____
 State of Alaska _____
vs. Defendant: _____ Date of Birth: _____
Case No(s): _____

PROSECUTOR'S APPLICATION FOR BAIL REVIEW HEARING

Hearing date requested: _____

- 1. This case alleges that there is a crime victim: Yes No
- 2. Defendant is not in custody is in custody at _____
- 3. I request a bail review hearing in District Court. Superior Court.
- 4. Relief requested:

- 5. Reason for request:
- _____

- 6. I certify that I notified defendant attorney attorney's office of this application by mail fax in person email phone on (date) _____ at ___ a.m. p.m.

_____ Date	_____ Signature of Applicant
_____ Phone Number of Applicant	_____ Printed Name of Applicant
_____ Fax Number of Applicant	_____ Attorney Bar Number

NOTICE REGARDING REQUEST FOR BAIL REVIEW HEARING

A hearing on this application:

- is ordered.
- The hearing will be held as follows:
Date: _____ Time: _____ Courtroom: _____
Location: _____
- A Notice of Hearing will be sent to you at a later date.
- is denied for the following reasons:

_____ Date	_____ Judicial Officer/Clerk ¹	_____ Type or Print Name
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¹ If request for hearing is denied, must be signed by a Judicial Officer.