

_____ That a licensed physician and certified chemical dependency counselor's certificates are attached to this verified petition; or

_____ That the alleged alcoholic or drug abuser has refused to submit to a medical examination or an alcoholic/drug evaluation. (Initial the correct response)

I request the Court set an early date for hearing on this petition, and direct the notice to be given; that upon hearing _____, the alleged alcoholic or drug abuser, be committed to the custody of _____ for treatment of alcoholism or drug abuse pursuant to SDCL 34-20A-70.

Dated this _____ day of _____, _____ at _____, South Dakota

Petitioner

Subscribed and sworn to before me this
_____ day of _____,

My commission expires _____.