SAMPLE

EA Renewal Request

Rev. 1/1/2025

Please use the following samples to help you fill out the blank forms.

ATTACHMENT CV-5014

		ATTACHMENT CV-3014
Your name	TELEPHONE NUMBER:	FOR COURT USE ONLY
Your address		
Tour address		
ATTORNEY FOR (Name): Self-Represented		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANT	A CLARA	
STREET ADDRESS: 191 North First Street, San Jose, CA 9511	3	
MAILING ADDRESS: 191 North First Street		
CITY AND ZIP CODE: San José, CA 95113 BRANCH NAME: Downtown Courthouse		
Person/Entity Seeking Protection: Your name	7	
Person From Whom Protection is Sought: Restrained Person's na	me	
DECLARATION IN SUPPORT OF EX PARTE APPLIC	CATION FOR	CASE NUMBER: DEPT #:
CIVIL RESTRAINING ORDERS		Your Court Case Number
I, the undersigned, declare:		
1. I am (choose one): attorney for Person or Entity See	king Protection	
⊠ self-represented Person or Entity □ □	/ Seeking Protection	
other (explain):	Che	eck one
2. The opposing party is represented by an attorney: Yes		and the state of t
(If you checked "yes", fill in the attorney's name, address, and	telephone number. If y	ou checked "no", fill in the other party's
name address, and te Party/Attorney name:	eir attorney's name	e, if they have one)
Address/Telephone number: Restrained Person's Addre	ess/Phone #	
3. OTHER CASES : Have the parties to this case been involved in	n litigation with each et	Check one, if "yes" list the
Juvenile, or Criminal Court Case? Yes No If "yes",	case(s) number(s):	case number(s) here
4. NOTICE		
a. I HAVE given notice to the opposing party and/or their	r attorney by the follo	wing method:
☐ Per		<u> </u>
Date:IFA`	VE BLANK	
I have	VE BEARK	
b. I HAVE NOT given notice of the request for orders be	cause (Check all that :	annly You must explain below).
This is an application for Civil Harassment Prevention		
Transitional Housing Misconduct, or Workplace Viole	,	
☐ Great or irreparable injury will result before the m	-	
It is impossible to give notice.		
The other party agrees to the orders requested.		
Other:		
c. Explanation:		
A hearing between the parties is already set I am ask	ing that this motion be	heard at the same time.
I am unable to serve the other party in the time require	ed by law.	
✓ I fear for my physical safety (and that of others, if app✓ Other:	licable).	
I declare under penalty of perjury that the forgoing is true and corre	ect.	
Today's date Print your name	Sign	your name
Today's date Print your name Print Name		rant's Signature

Page 1 of 2

INSTRUCTIONS

Please refer to Santa Clara County Local Civil Rules for more information. This form is not for use in restraining order applications filed at Family Court.

This form is required in Santa Clara County, if you are asking the Judge to make immediate orders without the other party being present for a hearing. These orders are called *ex parte* orders. This form must be completed in any case where *ex parte* orders are requested. If you have given notice to the other side of your case, you must state the form of notice given. Notice means providing the other side of the case, either the attorney or a self-represented party, with copies of any papers that you want the Judge to review and any orders that you are requesting. If you have not given notice, you must explain why you have not given notice. There are some circumstances when notice may be waived, such as cases involving allegations of domestic violence where the safety of a party or a child might be at risk if notice is given. It is up to the Judge in your case to determine whether notice will be required or not.

SECTION #1

State whether you are the Petitioner or the Respondent in the case. Once a case is filed, the parties keep the same status in the case. You do not change from the Respondent to the Petitioner by filing a new motion in the case. If you do not have an attorney, you are considered self-represented.

SECTION #2

If the other party is represented by an attorney, you must provide the Court with the attorney's name and address. If the other party is not represented by an attorney, you must provide the Court with the other party's address.

SECTION #3

It is very important to list all other cases in which you and the other party have been involved with the courts. This would include other Family Law, Probate, Juvenile, Restraining Order, Child Support, Civil, or Criminal matters. If you do not have the case number, please put unknown and list the county and the year of the filing, if possible.

SECTION #4A

Unless notice is excused by the Court, you must provide notice of this motion to the other party before you deliver a copy to the Court. When you give such notice, specify how you did it (by courier or personally, for example) and at what time and date. Also, please explain how you know that the other side received copies of your papers and what response you were given.

SECTION #4B

If you did not give notice of this application, explain why in this section. Check as many boxes as apply. You may also write out any further explanation of your reasons for not giving notice.

After this form is completed, attach it to your restraining order application and submit them as follows:

- If Civil Harassment, Workplace Violence, Private Postsecondary School Violence, or Transitional Housing Misconduct; to the Civil Division Clerk's Office at 191 North First Street, San José, CA 95113
- If Elder or Dependant Adult Abuse; to the Family Division Clerk's Office at 201 North First Street, San José, CA 95113

ΕA	\- 710	Notice of Hearing to Renew Restraining Order	Clerk stamps date here when form is filed.
1) Pr	otected I	Elder or Dependent Adult	
a.	Full Name	Protected Person's legal name	
	Dersor difference Full N	If you are NOT the protected person listed above, mark this box and write your name.	
	Lawyer fo	or person named above (if any for this case):	
	Name: Se	elf-Represented State Bar No.:	Court name and street address:
	Firm Nan	e: Self-Represented	Superior Court of California, County of
b.	If you do l private, yo have to gi	ress (If you have a lawyer, give your lawyer's information. not have a lawyer and want to keep your home address ou may give a different mailing address instead. You do not ve telephone, fax, or e-mail.):	Santa Clara 191 N. First St. 191 N. First St. San Jose, CA 95113
	Address: City:	Protected Person's mailing address Note: Use a SAFE mailing address.	Fill in case number:
		e:Fax:	Your Court Case Number
		ddress:	
Fu Ad	estrained Il Name: Idress (if kn ty:	Name and Address of the Restrained Person	
	ourt Hear	ing set a court hearing date. Court will fill in box below.	



At the hearing, the judge can renew the current restraining order for up to another five years or make it permanent. You *must* continue to obey the current restraining order until the hearing. At the hearing, you can tell the judge if you do not want the order against you renewed. If the restraining order is renewed, you *must* obey the order even if you do not attend the hearing.

If you wish to make a written response to the request to renew the restraining order, you may fill out Form EA-720, *Response to Request to Renew Restraining Order*. File the original with the court before the hearing and have someone age 18 or older—**not you**—mail a copy of it to the person in 1 at the address in 1 at least -2- days before the hearing. Also file Form EA-250, *Proof of Service of Response by Mail*, with the court before the hearing.

This is a Court Order.

ceb.com Forms

Your Court Case Number

To the Protected Person:

(4) Service and Response

Someone age 18 or older—not you or anyone else protected by the restraining order—must personally serve (give) a copy of the following forms on the restrained person at least <u>-5-</u> days before the hearing.

- EA-700, Request to Renew Restraining Order;
- EA-710, *Notice of Hearing to Renew Restraining Order* (this form);
- EA-720, Response to Request to Renew Restraining Order (blank copy);
- EA-130, the current *Elder or Dependent Adult Abuse Restraining Order After Hearing* for which renewal is requested.

After the restrained person has been served, file Form EA-200, *Proof of Personal Service*, with the court clerk. For help with service, read Form EA-200-INFO, *What Is "Proof of Personal Service"?*

Date:

LEAVE BLANK



Request for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the hearing. Contact the clerk's office or go to www.courts.ca.gov/forms for Request for Accommodations by Persons with Disabilities and Response (Form MC-410). (Civ. Code, § 54.8.)

This is a Court Order.

	ΞΑ	-700 Request to Renew Restraining Order	Clerk stamps below when form is filed.
1	Pro	otected Elder or Dependent Adult Full Name: Protected Person's legal name	
		different (pers above, mark this box and write your name.	
		Lawyer for person named above (if any for this case): Name: Self-Represented Firm Name: Self-Represented	Court name and street address: Superior Court of California, County of
	b.	Your Address (If you have a lawyer, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, you may give a different mailing address instead. You do not have to give telephone, fax, or e-mail.):	Santa Clara 191 N. First St. 191 N. First St. San Jose, CA 95113
		Address: Protected Person's mailing address Note: Use a SAFE mailing address.	
		City:	Your Court Case Number
		Telephone:Fax: E-Mail Address:	Four Court Case Number
2		estrained Person	
	Ad	1 Name:Name and Address of the Restrained Person dress (if knov y:	ip:
3	I as	equest to Renew Restraining Order sk the court to renew the Elder or Dependent Adult Abuse Restraining (by of the order is attached. The order ends on (date): Anis is my first request to renew the order Check her	t file before the order expires
		# of times order times. I want the order to be renewed for five years permanent is ask the court to renew the order because (explain below):	Are you asking for 5 more years or a permanent order?
	.	Check here if there is not enough space for your answer. Attach a 3d—Reasons to Renew Order" for a title. You may use Form MC-	025, Attachment.
		This is where you explain why you want the order renewed for above. Are you in continued fear? Have there been violations	_
		eclare under penalty of perjury under the laws of the State of California l correct te: Today's date	that the information above is true
		Print your name Sign your name	9
	Тур	Sign your name Sign your name	
		This is not a Court Order	

Request to Renew Restraining Order

EA-700, Page 1 of 1

	MC-025
Your last name v. Restrained Person's last name	Your Court Case Number
ATTACHMENT (Number) :	3d_ icial Council form.)
You may use this page to continue yo	ur declaration explaining
why you need a renewal of the	restraining order.
	· · · · · · · · · · · · · · · · · · ·
	

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page ____ of ____ (Add pages as required)



CLETS-001 Confidential Information for Law Enforcement

Instructions: If you are asking for a restraining order, you must complete this form and give it to the court clerk, along with the other court forms required in your case. If the judge grants the restraining order, information you give on this form will be entered into a database (called CLETS) to help law enforcement enforce the order. If information changes later, you may	
complete this form again and turn it in to the court. Your Case Number, if y	ve order
Information that has a star (*) next to it is required. All other information is helpful.	ort #'s
Date received by Court.	Date this form is turned in
Person You Want a Restraining Order Against Address:	
*Name: Restrained Person's Name and Address City: State: Other names used: List any other names the Restrained Person uses DOR and gonder D.O.B.:	
Other names used: List any other names the Restrained Person uses, DOB and gender D.O.B.: Marks, scars, or tattoos: SSN:	Gender:
Telephone: Complete as much information as possible about the restrained person	
Vehicle type:	
Name of employer	
Does the person sp	1
If the Restrained Person have any firearms, firearm parts, ammunition or body armor, downward items they have in as much detail as possible and indicate where they are kept, if key are kept, if key are kept in a second	
what items they have in as much detail as possible and indicate where they are kept, if key Your Name: (Skip 3) and 4 if you are asking for a gun violence restraining order (form GV-100).) Your Information	known.
*Your Name: Your Name (Skip ③ and ④ if you are asking for a gun violence restraining order (form GV-100).) Your Information *Age: Condon: Mark this postion as fully as a posible. The items in held are mandatory.	
what items they have in as much detail as possible and indicate where they are kept, if key are asking for a gun violence restraining order (form GV-100).) 3 Your Information *Age: Race: Complete this section as fully as possible. The items in bold are mandatory.	known.
what items they have in as much detail as possible and indicate where they are kept, if key are asking for a gun violence restraining order (form GV-100).) 3 Your Information *Age: Race: Complete this section as fully as possible. The items in bold are mandatory.	known.
*Your Name: Your Name (Skip 3) and 4) if you are asking for a gun violence restraining order (form GV-100).) Your Information *Age: Race: Complete this section as fully as possible. The items in bold are mandatory.	known.
what items they have in as much detail as possible and indicate where they are kept, if I are a symmetric and	X (nonbinary
what items they have in as much detail as possible and indicate where they are kept, if k *Your Name: Your Name (Skip ③ and ④ if you are asking for a gun violence restraining order (form GV-100).) Your Information *Age: Race: Complete this section as fully as possible. The items in bold are mandatory. Do you speak English? Yes No (list language): 4 Other People You Want Protected *Name: If you asked to protect additional people, you must list them here. Complete the information as fully as possible. The items in bold are mandatory.	X (nonbinary
what items they have in as much detail as possible and indicate where they are kept, if k *Your Name: (Skip ③ and ④ if you are asking for a gun violence restraining order (form GV-100).) Your Information *Age: Race: Complete this section as fully as possible. The items in bold are mandatory. Do you speak English? □ Yes □ No (list language): 4 Other People You Want Protected *Name: *Na	X (nonbinary
what items they have in as much detail as possible and indicate where they are kept, if k *Your Name: Your Name (Skip ③ and ④ if you are asking for a gun violence restraining order (form GV-100).) Your Information *Age: Race: Complete this section as fully as possible. The items in bold are mandatory. Do you speak English? □ Yes □ No (list language): 4 Other People You Want Protected *Name: If you asked to protect additional people, you must list them here. Complete inthe information as fully as possible. The items in bold are mandatory.	X (nonbinary

SER-001

Request for Sheriff to Serve Court Papers

Instructions: Each county in California has a sheriff (and sometimes a marshal's office) that can serve different types of court papers, including restraining orders. Note that the sheriff cannot guarantee that they will be successful in finding the person you need served, but they will try to serve based on the information you put on this form.

- Complete this form for each set of papers you need served. You must complete a separate form for each person you need served.
- Find out where the person you need served is located. Give your papers to the sheriff or marshal's office in that county.
- You may have to pay for service of some court papers. For more information, see page 5 of this form, or go to https://selfhelp.courts.ca.gov/ sheriff-serves.
- Do not use this form if you are asking the sheriff to enforce a wage garnishment order on an employer. Instead, use forms WG-001, Application for Earnings Withholding Order, and WG-035, Confidential Statement of Judgment Debtor's Social Security Number.
- If you want the sheriff to enforce a writ or levy, complete this form and form SER-001A, Special Instructions for Writs and Levies—Attachment.

CONFIDENTIAL

To Court Clerk: Do not file this form.

Sheriff File Number (for sheriff to complete, if needed):

LEAVE BLANK

Fill in case number:

Court Case Number:

COURT CASE #'s Only Do NOT use police card/report #'s

If you are starting a new case, you will be given a case number when you file your Restraining Order forms.

All information is required unless it is listed as optional or does not apply to your case.

To the Sheriff or Marshal of (name of county):

County where service is requested

- **Your Information**
 - a. Your name (party requesting service):

Your name, as listed on the Restraining Order forms

b. Your lawyer's information (if you have one)

Name: Self-Represented

Firm name:

Your last name v. Restrained Person's last name c. Court case name:

(example: Garcia v. Smith)

d. Contact information for the sheriff or marshal to reach you

(Give an address where you can receive mail regularly, like a post office box, a Safe at Home address, or another safe address. If you have a lawver, give the lawver's information.)

Address to receive mail: City:

Your mailing address, this should be a safe address where you can reliably receive mail (usually the same address listed on your restraining order forms).

Telephone null f you want the Sheriff's Office to have your phone number or email so they can contact you, if necessary, list them here.

This is not a court form. Do not file with the court.

			Court Case Number:
			COURT CASE #'s Only
		Complete this section about the Restrained	Do NOT use police card/report #'s
3	Inforr	nati Person. This information will help the Sheriff in	
	(Check	trying to locate and serve them, so fill it out as	
	(Check	completely as possible.	
	a. 🗶	ask the sheriff to serve a person (complete section below)	
	(1)	Name of person: Restrained Person's name as listed on your R	Restraining Order forms
		Nicknames or aliases (optional): - If the Restrained Person uses	any other names, list them here
	(2)	Telephone number (optional): Restrained Person's phone number	per, if known
	(3)	Can you describe the person?	
		☐ No, Only check "No", if you cannot provide ANY of the info	rmation requested below.
		Yes (complete the section below with any information you have,):
		Ge Fill in this section with ANY information you have abou	ıt the Restrained
		He Person. Write "unk" if the information is unknown.	
		Da	
		Rac	
		Spe	
		Ve	
		\Box Check here if you are including a picture of the person.	
	(4)	Do you know of any safety or accessibility issues?	
		\square No Check "Yes", if any of the items below apply to the	е
		☐ Yes (com Restrained Person then check ALL that apply.	
		The person (check all that apply):	
		Has a gun or other weapon.	☐ Is on probation or parole.
		☐ Has a history of violence or abuse.	☐ Has an aggressive animal.
		☐ Has special training (examples: military, first responder).	☐ Has mental health issues.
		☐ Is deaf or hard of hearing.☐ Does not speak English (list language):	
		Add any other information about safety or accessibility that	vou know about:
			,
	b. 🗌	I ask	1
		Nan	
		Tele	
	(2)	If the LEAVE BLANK	
		If th	`
	` ′		
	(4)	List	

CONFIDENTIAL

This is not a court form. Do not file with the court.

	Do NOT use polic	SE #'s Only e card/report #'s
) A	ddress Where Person or Entity Should Be Served	
(Ti	he sheriff typically serves during normal business hours. Check with the sheriff's office for the	exact times.)
Ad	$_{ m idres}$ List the Restrained Person's address. This is where the Sheriff's Office will go to tr	y to serve
Ci	·	
	tte code or special instructions Complete this if it applies When is the Restrained Person	most likely to
Be	est time to serve at this address (example: 8 a.mnoon): be at the address provided?	
	Che If the Restrained Person is in jail/prison, check here and list the facility.	
Al	ternate address (optional)	
(If	the person cannot be found at the address listed above, some sheriffs may try a second address	
sai	If you have an alternate address for the Restrained Person, fill in this section.	Plow.)
110	and cos	Business
Cit		
	est time to serve at this address (example: 8 a.m.—noon):	_
	formation About Your Request What type of court papers are you giving the sheriff to serve (examples: summons, restraining small claims, bank levy, or writ of attachment)? Restraining Order	g order, eviction,
b.	List all forms or court papers you want served on the person in 3 a. (optional). (Note: You can list each form by its form number (example: FL-100, SC-100). If there is no for the title of the document. The court may have ordered you to serve certain papers. Look at the list all forms required. If you do not know which papers you need to serve, ask a lawyer, or conself-help center for free information.)	court's order and
	LEAVE BLANK	

Court Case Number:

c. Is there a court hearing (court date)?

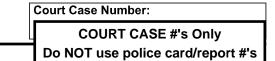
This question depends on what is being served. Unsure? Ask staff for assistance.

Restraining Order Request: You requested a restraining order but your case has not had a trial and been decided by a Judge and there is an upcoming hearing. You will check "Yes" and list the court date here. For new requests, if you are asking for the Santa Clara County Sheriff's Office to serve, court staff will fill in the date for you once the paperwork has been processed.

Restraining Order After Hearing: You already had a hearing and the court granted your request for a longer term restraining order (usually up to 5 years). You will check "No".



			C	ourt Case	e Number:	
					OURT CASE #'s Only use police card/report	rt #'s
5) d.	Lathana a daadlina fan aansiaa'				-	ι π 3
	This question depends on a Restraining Order Request: Judge. The deadline is usually 5 Restraining Order After Hear restraining order (usually up to 5 Person for a violation unless the	You requested a restraidays before the court darring: You already had years). There is no spec	ning order but your case hate. a hearing and the court gr	nas not ha anted you	ad a trial and been decide ur request for a longer ten	m
e.	Subst This question depends Restraining Order Requestion of service in your of the property	luest: Personal Service case. er Hearing: The order v	is required UNLESS the o	court has	granted an alternative	
f.	Is there any other information No	you want or need to g	ive to the sheriff to serv	ve your c	court papers?	•
	Yes (if y If you want the shelp them with shelp the shelp the shelp the shelp the shelp the shelp them with shelp the	Sheriff's Office to knowers		will		
		,				
If y Wr (O)	of orcement of Writ or Le you want its and L you wan you wan you wan	<u> </u>	E BLANK	22 004	uction	s for
	No. I onl				paper	S.
Date:	ignature (party asking for se	ervice, or their lawyer)				
Print yo	our name		Sign your name			_
	Type or print your name	e , _	Sign your nam	ne (may b	be electronic)	
	_This is r	CONFID	ENTIAL Do not file with the	court.		



Your Next Steps

- Find out if you need to pay a fee for service by asking the court's self-help center, a lawyer, or the sheriff's office. Here are some situations where you **do not** need to pay for service:
 - If you have a fee waiver in your case (fee waiver granted by a judge on form FW-003 or FW-005).
 - If you are serving a domestic violence, elder abuse, or gun violence restraining order.
 - If you have a civil harassment, workplace violence, or school violence restraining order based on a credible threat of violence or stalking.
- Give this form and a copy of all the court papers you need served to the sheriff or marshal, including a copy of a fee waiver (if you have one). If you do not have to pay a fee to the sheriff, you can send your papers electronically. If you have to pay a fee, contact the sheriff to find out your options for turning in your request. Note that you can always turn in your request in person.
- You should get a form back from the sheriff.
 - If the sheriff was able to serve your court papers, you should receive a form (called a proof of service). **Make sure** you get a copy from the sheriff and file it with the court. Note that if there is a court stamp at the top right corner of the first page, it has already been filed and you do not need to file it with the court.
 - If the sheriff was unable to serve your court papers, you should receive a form (sometimes called declaration of due diligence) that tells you that service was unsuccessful and will give details about when the sheriff tried to serve the person. If the sheriff was unable to serve your papers, you can ask a lawyer or court's self-help center about your next steps.
- To find your local court self-help center, go to https://selfhelp.courts.ca.gov/. Self-help center staff will not act as your lawyer but may be able to give you information to help you decide what to do in your case. Services are free.

To Sheriff or Marshal

- This form is confidential and must not be made public.
- Any papers submitted with this form should be served and listed on the applicable proof of service form.
- Note that (5) b is optional and may help to identify documents that should have been submitted but were not received by your office.
- Under Government Code section 26666.2, once you've received a completed copy of this form and forms for service, you must attempt service unless:
 - Any order submitted does not have a judge's signature or other representation of a judge's signature; clerk's endorsement; or court stamp, seal, or other court endorsement; or
 - A court case number is not listed on the order, summons, or other notice.

CONFIDENTIAL

This is not a court form. Do not file with the court.