

SAMPLES

RENEW CHRO

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

Rev. 1/1/2025

NAME AND ADDRESS OF PARTY OR ATTORNEY FOR PARTY: <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> Your legal name Your address </div> ATTORNEY FOR, (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: 191 North First Street, San Jose, CA 95113 MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, CA 95113 BRANCH NAME: Downtown Courthouse	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> *NOTE: Your contact information will be seen by the Restrained Person so use a mailing address that is safe on all your forms. It cannot be left blank. You do not need to list a phone number or email address.* </div>
Person/Entity Seeking Protection: <div style="border: 1px solid black; padding: 2px 5px;">Your legal name</div> Person From Whom Protection is Sought: <div style="border: 1px solid black; padding: 2px 5px;">Restrained person's legal name</div>	<div style="border: 1px solid black; padding: 5px; text-align: center;"> Court case #'s only Do NOT use police card/report #'s </div>
DECLARATION IN SUPPORT OF EX PARTE APPLICATION FOR CIVIL RESTRAINING ORDERS	

I, the undersigned, declare:

1. I am (choose one):

☐ attorney for Person or Entity Seeking Protection
☒ **self-represented Person or Entity Seeking Protection**
☐ other (explain): _____
2. **The opposing party is represented by an attorney:** ☐ Yes ☒ No

Choose one

(If you checked "yes", fill in the attorney's name, address, and telephone number. If you checked "no", fill in the other party's name address, and tel.)

Party/Attorney name:

Restrained person's legal name (or their attorney)

Address/Telephone number:

Restrained person's address and phone number
3. **OTHER CASES:** Have the parties to this case been involved in another Civil, Family, Probate Juvenile, or Criminal Court Case? ☐ Yes ☒ No

Choose one

If "yes" explain: _____
4. **NOTICE**
 - a. **I HAVE given notice to the opposing party and/or their attorney by the following method:**

LEAVE THIS SECTION BLANK

- b. **I HAVE NOT given notice of the request for orders because (Check all that apply. You must explain below):**

☒ This is an application for Civil Harassment Prevention Act, Elder Abuse, Private Postsecondary School Violence, Transitional Housing Misconduct, or Workplace Violence Act restraining orders and:

☒ Great or irreparable injury will result before the matter can be heard on notice.
☐ 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 asking that this motion be heard at the same time.
☐ I am unable to serve the other party in the time required by law.
☒ I fear for my physical safety (and that of others, if applicable).
☐ Other: _____

I declare under penalty of perjury that the forgoing is true and correct.

Today's date	Print your legal name	Sign your name
Date	Print Name	Declarant's Signature

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

CH-710**Notice of Hearing to Renew
Restraining Order**

Clerk stamps date here when form is filed.

1 Protected Persona. Your Full Self- **YOUR NAME**Your Name Firm
NOTE: Your address will be seen by the Restrained Person so use a mailing address that is safe on all your forms. It cannot be left blank.b. Your inform home
instead. You do not have to give telephone, fax, or e-mail.):Address: _____
City: **YOUR ADDRESS** State: _____ Zip: _____
Telephone: _____ Fax: _____
E-Mail Address: _____

Fill in court name and street address:

Superior Court of California, County of Santa Clara
191 North First Street
191 North First Street
San Jose, CA 95113
Civil Division**COURT CASE #S ONLY**
DO NOT USE POLICE CARD/REPORT #S**2 Restrained Person** **RESTRAINED PERSON'S NAME**Full Name: _____
Address: **RESTRAINED PERSON'S ADDRESS**
City: _____ State: _____ Zip: _____**To the Restrained Person****3 Court Hearing**

The judge has set a court hearing date. Court will fill in box below.

The current restraining order stays in effect until the end of the hearing.**Hearing** →Date: _____ Time: _____ Name and address of court if different from above:
191 North First Street
San Jose, CA 95113**LEAVE BLANK, CLERK WILL FILL THIS IN FOR YOU**

At the hearing, the judge can renew the current restraining order for up to another five years. 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 CH-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 protected person at the address in (1) at least **2** days before the hearing. Also file form CH-250, *Proof of Service of Response by Mail*, with the court before the hearing.

This is a Court Order.

To the Protected Person:

4 Service and Response

5

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 5 days before the hearing.

- CH-700, *Request to Renew Restraining Order*;
- CH-710, *Notice of Hearing to Renew Restraining Order* (this form);
- CH-720, *Response to Request to Renew Restraining Order* (blank copy);
- CH-130, the current *Civil Harassment Restraining Order After Hearing* for which renewal is requested.

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

LEAVE BLANK

Date. _____

LEAVE BLANK

Judicial Officer



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.

CH-700**Request to Renew Restraining Order**

Clerk stamps date here when form is filed.

1 Protected Persona. Your Full Name: **YOUR NAME**You are ~~Self-Represented~~ *have one for this case*.

***NOTE:** Your address will be seen by the Restrained Person so use a mailing address that is safe on all your forms. It cannot be left blank.*

b. You *If you prefer to have to give telephone, fax, or e-mail.)*Address: **YOUR ADDRESS** City: _____ Zip: _____

Telephone: _____ Fax: _____

E-Mail Address: _____

Fill in court name and street address:

Superior Court of California, County of Santa Clara
 191 North First Street
 191 North First Street
 San Jose, CA 95113
 Civil Division

COURT CASE #S ONLY
DO NOT USE POLICE CARD/REPORT #S

2 Restrained PersonFull Name: **RESTRAINED PERSON'S NAME**Address (if known): **RESTRAINED PERSON'S ADDRESS**

City: _____

3 Request to Renew Restraining OrderI ask the court to renew the *Civil Harassment* is attached.**YOU MUST ATTACH A COPY OF THE CURRENT RESTRAINING ORDER**

of the order

a. The order ends on (date): **FILL IN DATE**b. ☐ This is my first time asking for the order.☐ The order has been renewed **CHOOSE ONE** times.c. I want the order to be renewed for ☐ five years ☐ other (specify): _____

d. I ask the court to renew the order because (explain below):

☒ Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 3d—Reasons to Renew Order" for a title. You may use form MC-025, Attachment.

See Attachment 3d-Reasons to Renew Order

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date:

TODAY'S DATE

Type or print your name

Sign your name

PRINT YOUR NAME

not a Court Or

SIGN YOUR NAME

SHORT

LAST NAME VS. LAST NAME

PERSON WHO FIRST STARTED THIS CASE GOES FIRST

COURT CASE #S ONLY
DO NOT USE POLICE CARD/REPORT #SATTACHMENT (Number) : 3d. Reasons to Renew
Restraining Order

(This Attachment may be used with any Judicial Council form.)

Page _____ of _____
(Add pages as required)**Attachment 3d-Reasons to Renew Order**

EXPLAIN TO THE COURT HERE WHY YOU WANT
THIS RESTRAINING ORDER RENEWED.

GIVE DETAILS AND SPECIFICS OF WHAT
THE PERSON HAS SAID OR DONE TO MAKE
YOU FEARFUL FOR YOUR SAFETY
AFTER THIS CURRENT RESTRAINING ORDER
EXPIRES.

(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 1 of 1

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. For juvenile orders, list the primary protected person's information in ② and ③.
- If the judge grants the restraining order, information you give on this form will be entered into a California 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.

To Court Clerk: Do not file this form. The information on this form must be entered into the protective order registry in CLETS.

Court fills in case number when form is received.

Case Number:

**Your Case Number, if you have one
Do NOT list police report #'s**

Date received by court:

**Date this form
is turned in**

Information that has a star (*) next to it is required. All other information is helpful.

① Person You Want a Restraining Order Against

*Name: **Restrained Person's Name and Address**

Address: _____
City: _____ State: _____ Zip: _____

Other names used: **List any other names the Restrained Person uses, DOB and** D.O.B.: _____ Gender: _____

Marks, scars, _____

Driver's license _____

Vehicle type: _____

Telephone: _____

Name of employer _____

Does the person _____

- ☐ Yes
☐ No (list last name)
☐ I don't know

**Complete as much information as possible
about the restrained person**

Does the person have any firearms (guns), firearm parts, ammunition, or body armor?

- ☐ No
☐ I don't know
☐ Yes (Give any information you have below, like the type, amount, or location of any items, if known.)

If the Restrained Person have any firearms, firearm parts, ammunition or body armor, describe what items they have in as much detail as possible and indicate where they are kept, if known.

This is not a Court Order—Do not place in court file.



2 *Your Name:

(Skip 3 and 4 if you are asking for a gun violence (form GV-100) or retail crime (form RT-100) restraining order.)

3 Your Information

*Gender: _____

*Age: _____

Date of Birth: _____

(If the judge has information from the database, you do not need to provide this information.)

Telephone: _____

Do you have a restraining order against you?

☐ Yes

☐ No

Complete this section about yourself as fully as possible. The items in bold are mandatory.

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.** h: _____

*Name: _____ h: _____

*Name: _____ *Gender: _____ Race: _____ Date of Birth: _____

*Name: _____ *Gender: _____ Race: _____ Date of Birth: _____

☐ Check here if you are asking to protect more than 4 additional people, ask the Restraining Order Help Center staff for an attachment. paper, write "Item 4" at the top, and attach _____

This is not a Court Order—Do not place in court file.