

Electronic Filing in Civil cases Forms



ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO. : E-MAIL ADDRESS: ATTORNEY FOR (<i>name</i>):	FOR COURT USE ONLY CASE NUMBER: JUDICIAL OFFICER: DEPARTMENT:
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
Plaintiff/Petitioner: Defendant/Respondent:	
CONSENT TO ELECTRONIC SERVICE AND NOTICE OF ELECTRONIC SERVICE ADDRESS	

1. The following party or the attorney for:

- a. plaintiff (*name*):
- b. defendant (*name*):
- c. petitioner (*name*):
- d. respondent (*name*):
- e. other (*describe*):

consents to electronic service of notices and documents in the above-captioned action.

2. The electronic service address of the person identified in item 1 is (*specify*):

Date:

 TYPE OR PRINT NAME

▶

 (SIGNATURE OF PARTY OR ATTORNEY)

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY CASE NUMBER:
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT: OTHER:	JUDICIAL OFFICER:
PROPOSED ORDER (COVER SHEET)	DEPT:

NOTE: This cover sheet is to be used to electronically file and submit to the court a proposed order. The proposed order sent electronically to the court must be in PDF format and must be attached to this cover sheet. In addition, a version of the proposed order in an editable word-processing format must be sent to the court at the same time as this cover sheet and the attached proposed order in PDF format are filed.

1. Name of the party submitting the proposed order:

2. Title of the proposed order:

3. The proceeding to which the proposed order relates is:
 - a. Description of proceeding:
 - b. Date and time:
 - c. Place:

4. The proposed order was served on the other parties in the case.

 (TYPE OR PRINT NAME)

▲ _____
 (SIGNATURE OF PARTY OR ATTORNEY)

CASE NAME:	CASE NUMBER:
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**PROOF OF ELECTRONIC SERVICE
PROPOSED ORDER**

1. I am at least 18 years old and **not a party to this action**.

a. My residence or business address is (*specify*):

b. My electronic service address is (*specify*):

2. I electronically served the *Proposed Order (Cover Sheet)* with a proposed order in PDF format attached, and a proposed order in an editable word-processing format as follows:

a. On (*name of person served*) (*If the person served is an attorney, the party or parties represented should also be stated.*):

b. To (*electronic service address of person served*):

c. On (*date*):

Electronic service of the *Proposed Order (Cover Sheet)* with the attached proposed order in PDF format and service of the proposed order in an editable word-processing format on additional persons are described in an attachment.

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

Date:

(TYPE OR PRINT NAME OF DECLARANT)

(SIGNATURE OF DECLARANT)

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar Number and Address)</i> TELEPHONE NO: E-MAIL ADDRESS <i>(Optional)</i> : ATTORNEY FOR <i>(Name)</i> :	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA STREET ADDRESS: MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San Jose, California 95113 BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER: JUDICIAL OFFICER:
CONSENT TO ELECTRONIC FILING AND SERVICE AND NOTICE OF ELECTRONIC SERVICE ADDRESS	DEPT:

1. The following party or the attorney for:
- a. Plaintiff *(name)*:
 - b. Defendant *(name)*:
 - c. Petitioner *(name)*:
 - d. Respondent *(name)*:
 - e. Other *(describe)*:

Consents to electronic filing of pleadings, and service of notices and documents in the above-captioned action.

2. The electronic service address of the person identified in item 1 is *(specify)*:

Date:

 (TYPE OR PRINT NAME)

▲

 (SIGNATURE OF PARTY OR ATTORNEY)

CASE NAME:	CASE NUMBER:
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(Note: If you serve Consent to Electronic Filing and Service of Pleadings, and Notice of Electronic Service Address by mail, you should use form POS-030, Proof of Service by First-Class Mail-Civil, instead of using this page.)

**PROOF OF ELECTRONIC SERVICE
CONSENT TO ELECTRONIC FILING AND SERVICE OF PLEADINGS
AND NOTICE OF ELECTRONIC SERVICE ADDRESS**

1. I am at least 18 years old and not a party to this action.
 - a. My residence or business address is *(specify)*:

 - b. My electronic service address is *(specify)*:

2. I electronically served a copy of the Consent to Electronic Service and Notice of Electronic Service Address as follows:
 - a. Name of person served:

 - b. Electronic service address of person served:
 On behalf of *(name or names of parties represented, if person served is an attorney)*:

 - c. On *(date)*:

 - d. At *(time)*:

Electronic service of the Consent to Electronic Service and Notice of Electronic Service Address on additional persons is described in an attachment.

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

Date:

(TYPE OR DECLARANT)

(SIGNATURE OF PARTY OR DECLARANT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER: JUDICIAL OFFICER:
NOTICE OF CHANGE OF ELECTRONIC SERVICE ADDRESS	DEPT.:

1. The following party or the attorney for:

- a. plaintiff (*name*):
- b. defendant (*name*):
- c. petitioner (*name*):
- d. respondent (*name*):
- e. other (*describe and name*):

is changing his or her electronic service address for electronic service of notices and documents in the above-captioned action.

2. The current electronic service address of the person identified in item 1 is (*specify*):

3. The new electronic service address of the person identified in item 1 is (*specify*):

4. All notices and documents regarding the action should be sent to the new electronic service address as of (*date*):

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF PARTY OR ATTORNEY)

CASE NAME:	CASE NUMBER:
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PROOF OF ELECTRONIC SERVICE
NOTICE OF CHANGE OF ELECTRONIC SERVICE ADDRESS

1. I am at least 18 years old and not a party to this action.
 - a. My residence or business address is *(specify)*:

 - b. My electronic service address is *(specify)*:

2. I electronically served a copy of the *Notice of Change of Electronic Service Address* as follows:
 - a. Name of person served:
On behalf of *(name or names of parties represented, if person served is an attorney)*:

 - b. Electronic service address of person served:

 - c. On *(date)*:

 - d. At *(time)*:

Electronic service of the *Notice of Change of Electronic Service Address* on additional persons is described in an attachment.

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

Date:

(TYPE OR PRINT NAME OF DECLARANT)

(SIGNATURE OF DECLARANT)

ATTORNEY (Name, State Bar number, and address):	
TELEPHONE NO.: _____ FAX NO. : _____	
E-MAIL ADDRESS: _____	
ATTORNEY FOR (Name): _____	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS: _____	
MAILING ADDRESS: _____	
CITY AND ZIP CODE: _____	
BRANCH NAME: _____	
PLAINTIFF/PETITIONER: _____	CASE NUMBER: _____
DEFENDANT/RESPONDENT: _____	
OTHER: _____	
ORDER OF EXEMPTION FROM ELECTRONIC FILING AND SERVICE	

The court has reviewed the request for exemption and makes the following orders:

- The court **grants** the request for exemption. The applicant may:
 file serve all documents in this case in paper form.
- The court **denies** the request for exemption for the following reason: _____

- The court needs more information to decide whether to grant the application request. The applicant must appear in court on the date below:

Name and address of court if different from above:

Hearing Date	→ Date: _____ Time: _____	_____
	Dept.: _____ Room: _____	_____ _____

Date: _____

JUDICIAL OFFICER

Clerk's Certificate of Service

I certify that I am not a party to this action and (check one):

- A certificate of mailing is attached.
- I handed a copy of this order to the applicant listed above, at the court, on the date below.
- This order was mailed first class, postage paid, to the applicant at the address listed above, from (city): _____, California on the date below.

Date: _____

By: _____
DEPUTY CLERK

ATTORNEY (Name, State Bar number, and address):	
TELEPHONE NO.:	FAX NO.:
E-MAIL ADDRESS:	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PLAINTIFF/PETITIONER:	CASE NUMBER:
DEFENDANT/RESPONDENT:	
OTHER:	
REQUEST FOR EXEMPTION FROM MANDATORY ELECTRONIC FILING AND SERVICE	

1. I, (name of applicant): _____, request to be exempt from the requirements for electronic
 filing service in this case because It would cause undue hardship or significant prejudice for the following reasons:

a. I do not readily have access to a computer with Internet access.

b. Other (please specify): _____

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

Date:

 (TYPE OR PRINT NAME)

 (SIGNATURE OF DECLARANT)

