

SAMPLES

EX PARTE REQUEST FOR ORDERS

Rev. 1/1/2023

**Use the samples to help you complete
the packet of blank forms.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):
Your Name: Your Legal Name
Your Mailing City, State, Zip: Your Address
TELEPHONE NO.: FAX NO. (Optional):
E-MAIL ADDRESS (Optional):
ATTORNEY FOR (Name): Self Represented

FOR COURT USE ONLY
SAMPLE ONLY
Do not write on this copy!
CASE NUMBER: Your Court Case Number
DEPARTMENT NUMBER:
FCS NUMBER:

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA
STREET ADDRESS: 201 N. First Street, San Jose, CA 95113
MAILING ADDRESS: 191 N. First Street, San Jose, CA 95113
CITY AND ZIP CODE:
BRANCH NAME: Family Justice Center Courthouse

PETITIONER:
RESPONDENT:

PETITIONER=Name of Person Who Started This Case*
*If you are opening a brand new court case
*If you have a previous court case and don't know, ask Court Staff.
RESPONDENT=The Other Person's Name In The Case

1. I am (choose one):
a. attorney for Petitioner Check one attorney for Respondent attorney for child(ren)
b. self-represented Petitioner self-represented Respondent
c. other (explain):

2. The opposing party or minor children is represented by an attorney: Yes No

If the other party has an attorney, put the attorney's info here. OR If the other party does not have an attorney, put the other party's info here instead.

3. OTHER CASES: Have the parties to this case been involved in another Family, Probate, Juvenile, or Criminal Court Case? Yes No If the answer is Yes, fill in the case number: CHOOSE ONE

4. OTHER APPLICATIONS: For another party, have have not made previous application(s) on the same issue. Orders were granted denied. Check the boxes that apply and explain in your declaration.

5. NOTICE
I HAVE given notice to all opposing parties and/or their attorney by the following method:
 Personal delivery Fax Overnight Carrier First Class Mail Other: _____
Date: _____ Time: _____ Person who received: _____

***** STOP AT ITEM 5 *****
CHECK WITH STAFF BEFORE COMPLETING THIS SECTION.

I have
 In person
 Written
b. I ask the spouse to give a verbal declaration of violence.
 The spouse agrees to the order.
 The spouse agrees to the order and the parties agreed in advance that notice will not be necessary with respect to the matter that is the subject of the request for emergency orders. Provide documentation of this agreement; and/or,

apply. In you must Domestic

PETITIONER=Name of Person Who Started This Case* *If you are opening a brand new court case R *If you have a previous court case and don't know, ask Court Staff. RESPONDENT=The Other Person's Name In The Case	CASE NUMBER <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;">Your Court Case Number</div>
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INSTRUCTIONS

For more information please refer to Superior Court of California, County of Santa Clara Local Rules 5 A & B and California State Rules, Rules 5.151, 5.165, 5.167, and 5.170.

This form is required in Santa Clara County, if you are asking the Judge to make immediate orders (also known as emergency or ex parte orders) without the other party being present for a hearing. This form must be completed in any case where ex parte orders or emergency orders are requested. If you are required to give notice, notice must be given before 10:00 a.m. on the court day before the Judge reviews the application, or the application will be delayed another 24 hours. Notice means providing the other side of the case, either all other attorneys or any 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 given notice to the other side of your case, you must state the form of notice given. If you ask the Court to not require notice, you must explain why. Sometimes notice is not required, such as cases involving allegations of domestic violence or 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 any 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 #5a.

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

SECTION #5c.

If you believe that you should not be required to give notice of this application and are asking the Court not to require notice, 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 or provide a separate declaration.

After this form is completed, attach it to your application or motion and submit them to the Court Specialist's Office at the Family Court Facility where you are dropping off your paperwork for review.

ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: Your name FIRM NAME: STREET ADDRESS: Your address CITY: TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	STATE BAR NUMBER: STATE: ZIP CODE: FAX NO.:	FOR COURT USE ONLY <h1 style="margin: 0;">SAMPLE ONLY</h1> <h2 style="margin: 0;">Do not write on this copy!</h2>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara STREET ADDRESS: 201 N. First Street, San Jose, CA 95113 MAILING ADDRESS: 191 N. First Street San Jose, CA 95113 CITY AND ZIP CODE: BRANCH NAME:		
PETITIONER: Petitioner's name (person who started the case) RESPONDENT: Respondent's name OTHER PARENT/PARTY:		
TEMPORARY EMERGENCY (EX PARTE) ORDERS <input type="checkbox"/> Child Custody <input type="checkbox"/> Visitation (Parenting Time) <input type="checkbox"/> Property Control <input type="checkbox"/> Other (specify): Check all the boxes that apply		CASE NUMBER: Court Case Number

1. **TO (name(s)):** The other party's name (if DCSS is involved in your case, write "DCSS" here too)

Check one Petitioner Respondent Other Parent/Party Other (specify):

A court hearing will be held on the *Request for Order* (form FL-300) served with this order, as follows:

a. Date:	Leave this box blank	Room: <input type="checkbox"/>
b. Address of court	<input type="checkbox"/> Same as noted above <input type="checkbox"/> Other (specify):	

2. **Findings:** Temporary emergency (ex parte) orders are needed to: (a) help prevent an immediate loss or irreparable harm to a party or to children in the case, (b) help prevent immediate loss of custody of the child, (c) help prevent immediate loss of the child's case, or (c) set or change procedures for a hearing or trial.

Check the boxes to indicate who you want to have custody of the minor child(ren) until the court hearing.

COURT ORDERS: The following temporary emergency orders expire on the _____ extended by court order:

3. **CHILD CUSTODY**

	Temporary physical custody, care, and control to:		
a. Child's name Date of Birth	Petitioner	Respondent	Other Party/Parent
Child #1's name and date of birth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child #2's name and date of birth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child #3's name and date of birth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Continued on Attachment 3(a)

b. **Visitation (Parenting Time)** The temporary orders for physical custody, care, and control of the minor children in (3) are subject to the other party's or parties' rights of visitation (parenting time) as follows (specify):

What visitation schedule do you want the court to order immediately for the parent who does not have custody?

See Attachment 3(b)

THIS IS A COURT ORDER.

PETITIONER: Petitioner's name (person who started the case) RESPONDENT: Respondent's name OTHER PARENT/PARTY:	CASE NUMBER: <div style="border: 1px solid black; padding: 2px; text-align: center; font-weight: bold;">Court Case Number</div>
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3. **CHILD CUSTODY (continued)**

c. **Travel restrictions**

- (1) The petitioner **must not remove the minor child(ren) from the state of California until the court hearing.**
- (2) **Complete this section if you want the court to restrict travel with the minor child(ren) until the court hearing.** minor children (*specify*):
- (b) from the following counties (*specify*):
- (c) other (*specify*):

d. **Child abduction prevention orders** are attached (see form FL-341(B)).

- e. (1) **Jurisdiction:** This court has jurisdiction to make child custody orders in this case under the Uniform Child Custody Jurisdiction and Enforcement Act (part 3 of the California Family Code, commencing with section 3400).
- (2) **Notice and opportunity to be heard:** The responding party was given notice and an opportunity to be heard as provided by the laws of the State of California.
- (3) **Country of habitual residence:** The country of habitual residence of the child or children is (*specify*):
- The United States of America Other (*specify*):
- (4) **If you violate this order, you may be subject to civil or criminal penalties, or both.**

4. **PROPERTY CONTROL**

a. Petitioner Respondent Other Parent/Party is given exclusive temporary use, possession, and control of the following property that the parties own or are buying lease or rent

b. Petitioner Respondent Other Parent/Party is ordered to make the following payments on the liens and encumbrances coming due while the order is in effect:

Pay to:	For:	Amount: \$	Due date:
Pay to:	For:	Amount: \$	Due date:
Pay to:	For:	Amount: \$	Due date:
Pay to:	For:	Amount: \$	Due date:

5. All other existing orders, not in conflict with these temporary emergency orders, remain in full force and effect.

6. **OTHER ORDERS** (*specify*): Additional orders are listed in Attachment 6.

Check with staff before completing this section.

Date: Leave blank

Leave blank

JUDGE OF THE SUPERIOR COURT

THIS IS A COURT ORDER.

PARTY WITHOUT ATTORNEY OR ATTORNEY NAME: Your name FIRM NAME: STREET ADDRESS: Your address CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY <h1 style="margin: 0;">SAMPLE ONLY</h1> <h2 style="margin: 0;">Do not write on this copy!</h2>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara STREET ADDRESS: 201 N. First Street, San Jose, CA 95113 MAILING ADDRESS: 191 N. First Street San Jose, CA 95113 CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: Petitioner's name (person who started the case) RESPONDENT: Respondent's name OTHER PARENT/PARTY:	
REQUEST FOR ORDER <input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> TEMPORARY EMERGENCY ORDERS <input checked="" type="checkbox"/> Child Custody <input checked="" type="checkbox"/> Visitation Check all the boxes that apply or Partner Support <input type="checkbox"/> Child Support <input type="checkbox"/> Domestic Violence /s Fees and Costs <input type="checkbox"/> Property Control <input type="checkbox"/> Other (specify):	
CASE NUMBER: Your Case Number	

NOTICE OF HEARING

1. TO (name(s)): The other party's name (if DCSS is involved in your case, write "DCSS" here too)

Petitioner Respondent Other Parent/Party Other (specify):

2. A COURT HEARING WILL BE HELD AS FOLLOWS:

a. Date:	Leave this box blank	<input type="checkbox"/> Room.:
b. Address of court:		

3. **WARNING to the person served with the Request for Order:** The court may make the requested orders without you if you do not file a *Responsive Declaration to Request for Order* (form FL-320), serve a copy on the other parties at least nine court days before the hearing (unless the court has ordered a shorter period of time), and appear at the hearing. (See form *FL-320-INFO* for more information.)

(Forms [FL-300-INFO](#) and [DV-400-INFO](#) provide information about completing this form.)

COURT ORDER
(FOR COURT USE ONLY)

It is ordered that:

4. Time for service until the hearing is shortened. Service must be on or before (date): 5 days before the hearing date
5. A *Responsive Declaration to Request for Order* (form FL-320) must be served on or before (date): 2 days before the hearing date
6. The parties must attend an appointment for child custody mediation or child custody recommending counseling as follows (specify date, time, and location):
7. The orders in *Temporary Emergency (Ex Parte) Orders* (form FL-305) apply to this proceeding and must be personally served with all documents filed with this *Request for Order*.
8. Other (specify):

Date: Leave blank Leave blank

JUDICIAL OFFICER

PETITIONER:	Petitioner's name (person who started the case)	NUMBER:
RESPONDENT:	Respondent's name	Your Case Number
OTHER PARENT/PARTY:		

REQUEST FOR ORDER

Note: Place a mark in front of the box that applies to your case or to your request. If you need more space, mark the box for "Attachment." For example, mark "Attachment 2a" to indicate that the list of children's names and birth dates continues on a paper attached to this form. Then, on a sheet of paper, list each attachment number followed by your request. At the top of the paper, write your name, case number, and "FL-300" as a title. (You may use *Attached Declaration (form MC-031)* for this purpose.)

1. **RESTRAINING ORDER INFORMATION**

One or more domestic violence restraining/protective orders are now in effect between (specify):

Petitioner Respondent Other Parent/Party (Attach a copy of the orders if you have one.)

The If there is a restraining order in place between you and the other party, complete this section and attach a copy, if you have one.

a. Juvenile: County/state (specify): _____ Case No. (if known): _____

b. Other: Check these boxes, if you are asking for Custody and Parenting Time orders. _____ No. (if known): _____

2. **CHILD CUSTODY**

I request temporary emergency orders

VISITATION (PARENTING TIME)

a. I request that the court make orders about the following children (specify):

Child's Name

Date of Birth

Legal Custody to (person who decides: health, education, etc):

Physical Custody to (person with whom child lives):

Child #1's name and date of birth
 Child #2's name and date of birth
 Child #3's name and date of birth

See attached FL-311

[Attachment 2a.](#)

b. The orders I request for child custody visitation (parenting time) are:

(1) Specified in the attached forms:

[Form FL-305](#)

[Form FL-311](#)

[Form FL-312](#)

[Form FL-341\(C\)](#)

[Form FL-341\(D\)](#)

[Form FL-341\(E\)](#)

Other (specify): _____

(2) As follows (specify): _____

[Attachment 2b.](#)

c. The orders that I request are in the best interest of the children because (specify):

[Attachment 2c.](#)

Explain why the orders you are requesting are good for your child(ren).

d. This is a change from the current order for child custody visitation (parenting time).

Complete this section if you are asking to change an order that was previously made.

(2) The visitation (parenting time) order was filed on (date): _____ . The court ordered (specify): _____

[Attachment 2d.](#)

PETITIONER:	Petitioner's name (person who started the case)	NUM	Your Case Number
RESPONDENT:	Respondent's name		
OTHER PARENT/PARTY:			

3. CHILD SUPPORT

(Note: An earnings assignment may be issued with this order.)

Complete this section if you are asking for child support. You must also complete form FL-150.

a. I request that the court order child support as follows.

Child's name and age

I request support for each child Monthly amount (\$) requested based on the child support guideline. (if not by guideline)

Child #1's name and age
 Child #2's name and age
 Child #3's name and age

Attachment 3a.

b. I want to change a current court order for child support filed on (date):

The court ordered child support as follows (specify):

Complete this section if you are asking to change an order the was previously made.

c. I have completed and filed with this Request for Order a current Income and Expense Declaration (form FL-150) or I filed a current Financial Statement (Simplified) (form FL-155) because I meet the requirements to file form FL-155.

d. The court should make or change the support orders because (specify):

Attachment 3d.

Explain why the court should grant your request for child support.

4. SPOUSAL OR DOMESTIC PARTNER SUPPORT

Complete this section if you are asking for spousal support. You must also complete form FL-150.

(may be issued.)

The court ordered \$ per month for support.

per filed on (date):

c. This request is to modify (change) spousal or partner support after entry of a judgment.

I have completed and attached Spousal or Partner Support Declaration Attachment (form FL-157) or a declaration that addresses the same factors covered in form FL-157.

d. I have completed and filed a current Income and Expense Declaration (form FL-150) in support of my request.

e. The court should should make, change, or end the support orders because (specify):

Attachment 4e.

Explain why the court should grant your request for spousal support.

5. PROPERTY CONTROL

I request temporary emergency orders

a. The petitioner respondent other parent/party be given exclusive temporary use, possession, and control of the following property that we own or are buying lease or rent (specify):

b. The petitioner respondent other parent/party be ordered to make the following payments on debts and liens coming due while the order is in effect:

Pay to: _____ For: _____ Amount: \$ _____ Due date: _____

Pay to: _____ For: _____ Amount: \$ _____ Due date: _____

Pay to: _____ For: _____ Amount: \$ _____ Due date: _____

Pay to: _____ For: _____ Amount: \$ _____ Due date: _____

c. This is a change from the current order for property control filed on (date):

d. Specify in Attachment 5d the reasons why the court should make or change the property control orders.

PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	<div style="border: 1px solid black; padding: 2px;">Petitioner's name (person who started the case)</div> <div style="border: 1px solid black; padding: 2px;">Respondent's name</div>	<div style="border: 1px solid black; padding: 2px; text-align: center;">Your Case Number</div>
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6. ATTORNEY'S FEES AND COSTS

I request attorney's fees and costs, which total (specify amount): \$ _____ . I filed the following to support my request:

- a. A current *Income and Expense Declaration* ([form FL-150](#)).
- b. A *Request for Attorney's Fees and Costs Attachment* ([form FL-319](#)) or a declaration that addresses the factors covered in that form.
- c. A *Supporting Declaration for Attorney's Fees and Costs Attachment* ([form FL-158](#)) or a declaration that addresses the factors covered in that form.

7. DOMESTIC VIOLENCE ORDER

- Do not use this form to ask for domestic violence restraining orders! Read [form DV-505-INFO](#), *How Do I Ask for a Temporary Restraining Order*, for forms and information you need to ask for domestic violence restraining orders.
- Read [form DV-400-INFO](#), *How to Change or End a Domestic Violence Restraining Order* for more information.

- a. The *Restraining Order After Hearing* (form DV-130) was filed on (date): _____
- b. I request that the court change end the personal conduct, stay-away, move-out orders, or other protective orders made in *Restraining Order After Hearing* (form DV-130). (If you want to change the orders, complete 7c.)
- c. I request that the court make the following changes to the restraining orders (specify): [Attachment 7c.](#)
- d. I want the court to change or end the orders because (specify): [Attachment 7d.](#)

8. OTHER ORDERS REQUESTED (specify):

[Attachment 8.](#)

If you are asking for orders that are not in the preprinted language, complete this section. Ask the Self-Help Center if you are not sure how to make your request.

9. TIME FOR SERVICE / TIME UNTIL HEARING I urgently need:

- a. To serve the *Request for Order* no less than (number): **5** court days before the hearing.
- b. The hearing date and service of the the *Request for Order* to be sooner.
- c. I need the order because (specify):

[Attachment 9c.](#)

Explain why you need an expedited hearing date.

10. FACTS TO SUPPORT the orders I request are listed below. The facts that I write in support and attach to this request cannot be longer than 10 pages, unless the court gives me permission.

[Attachment 10.](#)

Tell the court why you are requesting the orders listed on this form and provide facts and/or evidence to support your request.
Note: You may only attach up to 10 pages.

I declare under penalty of perjury under the laws of the State of California that the information provided in this form and all attachments is true.

Date: Today's date

Print your name

(TYPE OR PRINT NAME)

Sign your name

(SIGNATURE OF APPLICANT)



Requests 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 proceeding. 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.)

PETITIONER: **Petitioner's name (person who started this case)**
 RESPONDENT: **Respondent's name**
 OTHER PARENT/PARTY:

CASE NUMBER:
Your court case number

CHILD CUSTODY AND VISITATION (PARENTING TIME) APPLICATION ATTACHMENT

—This is not a court order—

TO Petition Response Request for Order Responsive Declaration to Request for Order
 Other (specify):

1. a. **Custody.** Custody of the minor children of the parties is requested as follows: Attachment 1a.

Child's Name	Date of Birth	Legal Custody to <i>(person who decides about the child's health, education, and welfare)</i>	Physical Custody to <i>(person the child regularly lives with)</i>
List all of the minor children you have with the other party (oldest to youngest): Child #1's name and date of birth Child #2's name and date of birth Child #3's name and date of birth		Who should have legal custody and who should have physical custody? You have three choices: your name, the other parent's name or joint	

b. **Custody with allegations of a history of abuse or substance abuse**

- (1) **Complete this section if there is a history of abuse as described in 1.b.(1) or if there is a history of substance abuse as described in 1.b.(2).** to have parent spouse, or the
- (2) Petitioner Respondent Other parent/party is (or are) alleged to have the habitual or continual illegal use of controlled substances, or the habitual or continual abuse of alcohol, or the habitual or continual abuse of prescribed controlled substances.
- (3) I ask that the court NOT order sole or joint custody of the minor child to the person(s) alleged to have a history of abuse or substance abuse.
- (4) Even though there are allegations, I ask that the court make the child custody orders in item 1a.
(Write the reasons why you think it would be good for the children that the person(s) be granted custody, even though there are allegations against them of a history of abuse or substance abuse.)
 Below: Attachment 1b. Other (specify):

2. **Visitation (Parenting Time).**

- Note: Un **Complete this section with the parenting schedule you are requesting for the parent that does not have the child most of the time.** ases
- a. See the attached _____ -page document dated (specify date):
- b. The parties will go to child custody mediation or child custody recommending counseling at (specify date, time, and location):
- Check here if you want the court to order you and the other party to go to mediation to work out a parenting plan.**
- d. No visitation (parenting time).

PETITIONER:	Petitioner's name (person who started this case)	CASE NUMBER:	
RESPONDENT:	Respondent's name	Your court case number	
OTHER PARENT/PARTY:			

e. Visitation (parenting time). (Specify start and ending date and time. If a month is specified, specify the day of the month.)

Petitioner's **Respondent's** **Other Parent's/Party's** parenting time

Check one to indicate who will have the parenting schedule listed below.

(1) **Weekends starting (date):**

(Note: The first weekend of the month is the first weekend with a Saturday.)

from _____ month _____
 to _____ month _____
 (day of week) (time)

Specify: start of school
 after school

Specify: start of school
 after school

(a) The parties will alternate the fifth weekends, with the petitioner respondent other parent/party having the initial fifth weekend, which starts (date):

(b) The petitioner respondent other parent/party will have the fifth weekend in odd even numbered months.

(2) **Alternate weekends starting (date):**

from _____ at _____ a.m. p.m./ if applicable, specify: start of school
 (day of week) (time) after school

to _____ at _____ a.m. p.m./ if applicable, specify: start of school
 (day of week) (time) after school

(3) **Weekdays starting (date):**

from _____ month _____
 to _____ month _____
 Specify: start of school
 after school

Specify: start of school
 after school

(4) Other visitation (parenting time) days and restrictions are: [listed in Attachment 2e\(4\)](#)
 as follows:

3. **Visitation (parenting time) with allegations of a history of abuse, substance abuse, or other parenting concerns**

a. **Supervised**

(1) I **petitioner** **respondent** **other parent/party** have supervised visitation with the child(ren) (specify below):

Complete this section to ask for supervised parenting time.

(a) Domestic violence, child abuse, or neglect

(b) Substance abuse: the habitual or continual illegal use of controlled substances, or the habitual or continual abuse of alcohol, or the habitual or continual abuse of prescribed controlled substances.

(c) Other parenting concerns (specify below):

(2) The reasons why the court should make the orders are (specify):
 (Write the reasons why you think unsupervised visitation (parenting time) would be bad for the children.)

Below [in Attachment 3a\(2\)](#) Other (specify):

PETITIONER: Petitioner's name (person who started this case) RESPONDENT: Respondent's name OTHER PARENT/PARTY:	CASE NUMBER: <div style="border: 1px solid black; padding: 2px; text-align: center;">Your court case number</div>
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(3) I ask for the following orders about the supervised visitation provider:

(a) Visitation (parenting time) be monitored by (name, if known):

(i) The person or agency is a professional provider. A professional provider must meet the requirements listed in *Declaration of Supervised Visitation Provider (Professional)* ([form FL-324\(P\)](#)) and sign the declaration.

(ii) The person is a nonprofessional provider. That person must meet the requirements listed in *Declaration of Supervised Visitation Provider (Nonprofessional)* ([form FL-324\(NP\)](#)) and sign a declaration.

(iii) The provider's phone number is (specify):

(b) Any costs of supervision be paid as follows: petitioner: _____ percent; respondent: _____ percent.
other parent/party: _____ percent.

b. **Unsupervised visitation (parenting time)**

(Con
abus

Only complete this section if you completed item 1.b. AND are asking for the visitation to be unsupervised. You must explain why this is in the child's best interests despite the allegations of abuse or substance abuse.

d to have a history of
ed to have
current spouse, or

(2) Petitioner Respondent Other parent/party is (or are) alleged to have the habitual or continual illegal use of controlled substances, or the habitual or continual abuse of alcohol, or the habitual or continual abuse of prescribed controlled substances.

(3) Even though there are allegations of a history of abuse or substance abuse, I request that the court order unsupervised visitation to (specify): Petitioner Respondent Other parent/party

(4) The reasons why the court should make the orders are (specify):
(Write the reasons why you think it would be good for the children that the person(s) be granted unsupervised visitation (parenting time) even though there are allegations against them of a history of abuse or substance abuse.)

Below: [in Attachment 3b.](#) Other (specify):

(5) The orders for visitation (parenting time) that you request must be specific as to time, day, place, and manner of transfer of the child, as Family Code section 6323(c) requires.

4. **Transportation for visitation (parenting time) and place of exchange**

Note: In cases of domestic violence, the court must have enough information to make orders that are specific as to the time, place, and manner of transfer of the child, as Family Code section 6323(c).

a. **Complete this section to indicate how the child will be transported for the parenting time.**

b. Transportation to begin the visits will be provided by (name):

c. Transportation from the visits will be provided by (name):

d. The exchange point at the beginning of the visit will be (address):

e. The exchange point at the end of the visit will be (address):

f. During the exchanges, the party driving the children will wait in the car and the other party will wait in the home (or exchange location) while the children go between the car and the home (or exchange location).

g. Other (specify):

PETITIONER: Petitioner's name (person who started this case)	CASE NUMBER:
RESPONDENT: Respondent's name	Your court case number
OTHER PARENT/PARTY:	

5. **Travel with children** The Petitioner Respondent Other parent/party following places:

Complete this section if you are asking to restrict travel with the minor child(ren).

c. other places (*specify*):

6. **Child abduction prevention.** There is a risk that one of the parties will take the children out of California without the other. **If there is a risk of child abduction, you will check the box and complete form FL-312.**

7. **Children's holiday schedule.** I request the holiday and vacation schedule set out below [on form FL-341\(C\)](#)

Complete this section if you are asking for specific parenting time orders during the holidays or for vacations. You may write in your request here or complete form FL-341(C).

8. **Additional custody provisions.** I request the additional orders for custody set out below [on form FL-341\(D\)](#)

Complete this section if you are asking for additional orders regarding custody. You may write in your request here or complete form FL-341(D).

9. **Joint legal custody provisions.** I request joint legal custody and want the additional orders set out below [on form FL-341\(E\)](#)

Complete this section if you are asking for additional orders regarding joint legal custody. You may write in your request here or complete form FL-341(E).

10. **Other.** I request the following additional orders (*specify*):

Complete this section if you are asking for other orders about the minor child(ren) that are not addressed anywhere else on this form.

SHORT TITLE:

Petitioner's Name and Respondent's Last Name

CASE NUMBER:

Your court case number

ATTACHMENT (Number) : 10

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*(This Attachment may be used with any Judicial Council form.)**(Add pages as required)*

EXPLAIN THE EMERGENCY SITUATION IN THE FIRST SENTENCE

Explain why the emergency orders you are requesting are in the best interest of the child(ren). And why the court should make those orders on an immediate, emergency basis pending the hearing. If you are asking the court to change an existing order, explain the reasons the change is needed. You should include dates and times of specific events and provide lots of detail.

For example, if you want the court to give you physical custody, you need to explain here why the child(ren) is better off living with you instead of the other parent.

If you are asking the court to order a parenting schedule either for you or the other parent, explain why the schedule you are requesting is in the best interest of the child(ren). If you are asking the court to stop the other parent's time with the child(ren) or order supervised visits, explain in detail the specific reasons why that is necessary.

You may also attach evidence to support your request. However, you may only had 10 pages attached to your request.

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

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