

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address):   TELEPHONE NUMBER: _____ FAX NUMBER (Optional): _____ EMAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</b> COURT ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, California 95113 DIVISION: Probate Division	
In the Matter of the Application of:  _____	
<b>ORDER FOR WRIT OF HABEAS CORPUS (RE: QUARANTINE DETENTION)</b>	CASE NUMBER: _____

The application of the Petitioner for a Writ of Habeas Corpus has been considered by the court.

The Court finds:

- The Santa Clara County Public Health Department has sufficient grounds to legally confine Petitioner pursuant to California Health & Safety Code Sections 120130 and 120175. This Petition is **DENIED**.
- The clerk of this court is directed to issue a Writ of Habeas Corpus returnable before said Superior Court in Department \_\_\_\_\_, located at 191 North First Street, San José, CA, on the date and time indicated on the attached writ. **Petitioner is required to appear by phone and/or have an attorney appear for them at the hearing.**
- Other Orders:**

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**WHETHER A HEARING IS GRANTED OR NOT, YOU ARE REQUIRED TO CONTINUE TO OBEY THE QUARANTINE ORDER UNDER CALIFORNIA HEALTH & SAFETY CODE SECTION 120220 PENDING FURTHER ORDER OF THE COURT. FAILURE TO COMPLY IS A MISDEMEANOR PUNISHABLE BY IMPRISONMENT, FINE OR BOTH FOR EACH DAY YOU FAIL TO COMPLY (CALIFORNIA HEALTH & SAFETY CODE SECTIONS 120275 AND 120295).**

Date: \_\_\_\_\_

\_\_\_\_\_  
Judicial Officer