

# Do You Need to Renew Your Elder or Dependent Adult Abuse Restraining Order, which is about to expire?

<b>Step 1</b>	<p><b>Complete the following forms</b> in blue or black ink:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> CV-5014 Declaration Re: Notice Upon Ex Parte Application for Orders for Civil Harassment</li> <li><input checked="" type="checkbox"/> EA-710 Notice of Hearing to Renew Restraining Order</li> <li><input checked="" type="checkbox"/> EA-700 Request to Renew Restraining Order</li> <li><input checked="" type="checkbox"/> CLETS-001 Confidential CLETS Information</li> <li><input checked="" type="checkbox"/> A copy of your current Restraining Order</li> </ul> <p><i>Only complete the next form if you want to ask the Sheriff to serve your forms:</i></p> <p><input type="checkbox"/> Local form FM-1041 Request for Sheriff to Serve and Sheriff's Fee Statement</p>
<b>Step 2</b>	<p><b>Review:</b> Bring your completed form to the <b>Restraining Order Help Center</b> at 201 N. First Street, San Jose to have them reviewed to make sure they are filled out correctly.</p>
<b>Step 3</b>  <b>There is no filing fee.</b>	<p><b>File:</b> Turn in the original to the <b>Court Specialist</b> located in the Courthouse at:  <b>191 North First Street, San Jose, CA 95113</b></p> <p>The Clerk's Office opens at 8:30am Monday-Friday, closing times are subject to change, visit <a href="http://www.sccourt.org">www.sccourt.org</a> or call <b>408-882-2100</b> for current office hours.</p> <p>The Court Specialist will give you a slip to let you know how to check if your forms are ready. If you lose that slip contact the Court Specialist at (408) 882-2100, option 6, then 5, then 4.</p>
<b>Step 4</b>	<p><b>Service:</b> After the filed copies are returned to you:</p> <ul style="list-style-type: none"> <li>• <b>Keep</b> for your records—1 filed copy</li> <li>• <b>If you did not ask the Sheriff to serve:</b> At least 5 days before the court date serve 1 filed copy and a blank <i>EA-720 Response to Request to Renew Restraining Order</i> on the other party. "Service" means: <b>someone, NOT you</b>, who is at least 18 years old must <b>hand deliver</b> the filed copies to the restrained person.</li> </ul> <p>Whoever does the service must complete the attached <i>Proof of Service (In Person)</i> form (EA-200) and give it back to you. You must file the original and a copy of this form at the Clerk's Office. The clerk will file stamp the copy and give it back to you. Keep this copy for your records.</p> <ul style="list-style-type: none"> <li>• <b>If you asked the Sheriff to serve your forms</b> the court will forward your forms to the Sheriff's office. You can contact the Sheriff's office at (408)808-4800 to see if they were able to serve</li> </ul>
<b>Step 5</b>	<b>Go to your court date.</b>

## WHAT HAPPENS IF I DO NOT ASK TO RENEW MY RESTRAINING ORDER?

When your original Restraining Order was granted, the Judge set an end date. If you do not apply to renew the restraining order **before** that date, the orders will end and you will no longer have a restraining order protecting you from the other party. If that happens and you still want a restraining order, you will have to file a brand new request and follow the same procedure you went through to get your expired restraining order.

***Please turn over for important information***



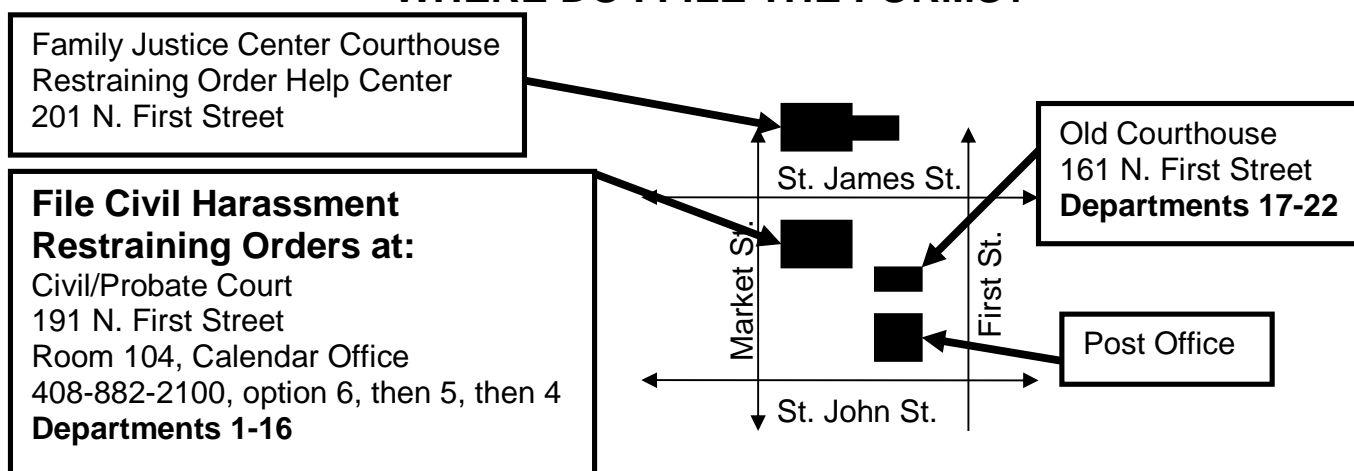
## HOW CAN I CHECK THE STATUS OF THE REQUEST TO RENEW A RESTRAINING ORDER I JUST FILED?

When you file your restraining order forms the Court Specialist at the courthouse will give you a slip with instructions on how to find out if your forms are ready. However, if you lose that slip, you can call the courthouse where you filed your forms (408) 882-2100.

## HOW LONG CAN I ASK TO RENEW MY RESTRAINING ORDER?

You may ask the Court to renew your restraining for either 5 years or permanently.

## WHERE DO I FILE THE FORMS?



## HOW CAN I GET HELP?

Here are some ways to get help:

- Go to <http://www.calbar.ca.gov/Public>, then click on “Lawyer Referral services” to hire or consult with a private attorney.
- For free legal advice and information, see our “Do-It-Yourself Resources” flyer. Go to [www.scscourt.org](http://www.scscourt.org), click on “Self-Help” then “Self-Help Flyers”.
- The Self Help Center/Family Law Facilitator – See our information flyer:
  - **Contact us:** Go to [www.scscourt.org](http://www.scscourt.org) then click “**Contact the Self Help Center**”. Walk-in assistance is limited to emergencies so contact us remotely first.
  - **Obtain Forms:** Go to [www.scscourt.org](http://www.scscourt.org) then click “**Complete Forms at Home**”
  - **Form Review:** Restraining order forms may be reviewed in person at the Restraining Order Help Center located at 201 N. First Street, San Jose, CA 95113, visit [www.scscourt.org](http://www.scscourt.org) for current office hours. If you cannot get to the office in person you may email your forms as a PDF file to [SHCDocReview@scscourt.org](mailto:SHCDocReview@scscourt.org). Reviews by email will take longer than in-person reviews.
  - Note: We **cannot** help people who have attorneys.

Superior Court, County of Santa Clara  
**Self Help Center/Family Law Facilitator’s Office**  
 201 N. First Street, San Jose, CA 95113  
 408-882-2926

NAME AND ADDRESS OF PARTY OR ATTORNEY FOR PARTY:		TELEPHONE NUMBER:	FOR COURT USE ONLY
ATTORNEY FOR (Name): <b>Self-Represented</b>			
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</b> 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			
Person/Entity Seeking Protection:  Person From Whom Protection is Sought:			
<b>DECLARATION IN SUPPORT OF EX PARTE APPLICATION FOR CIVIL RESTRAINING ORDERS</b>			CASE NUMBER: _____ DEPT #: _____

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  
 (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 telephone number.  
 Party/Attorney name: \_\_\_\_\_  
 Address/Telephone number: \_\_\_\_\_
3. **OTHER CASES:** Have the parties to this case been involved in litigation with each other in another Civil, Family, Probate Juvenile, or Criminal Court Case? ☐ Yes ☐ No If "yes", case(s) number(s): \_\_\_\_\_
4. **NOTICE**
  - a. **I HAVE given notice to the opposing party and/or their attorney by the following method:**  
☐ Personal delivery ☐ Overnight Carrier ☐ First Class Mail ☐ Other: \_\_\_\_\_  
 Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 I have received confirmation that the other party has received my papers as follows: (describe) \_\_\_\_\_
  - 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.

\_\_\_\_\_  
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

**Notice of Hearing to Renew  
Restraining Order**

Clerk stamps date here when form is filed.

Court name and street address:

Superior Court of California, County of

**Santa Clara**  
**191 N. First St.**  
**191 N. First St.**  
**San Jose, CA 95113**

Fill in case number:

**Case Number:****1 Protected Elder or Dependent Adult**

a. Full Name: \_\_\_\_\_

☐ Person requesting protection for the elder or dependent adult, if  
different (*person named in item ③ of Form EA-100*):

Full Name: \_\_\_\_\_

Lawyer for person named above (*if any for this case*):Name: **Self-Represented** State Bar No.: \_\_\_\_\_Firm Name: **Self-Represented**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.*):

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**2 Restrained Person**

Full Name: \_\_\_\_\_

Address (*if known*): \_\_\_\_\_

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** →

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

Dept.: \_\_\_\_\_ Room: \_\_\_\_\_

Name and address of court if different from above:

**191 N. First Street****San Jose, CA 95113**

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.**

**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 **-5-** 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: \_\_\_\_\_

\_\_\_\_\_  
*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](http://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.**

## Request to Renew Restraining Order

Clerk stamps below when form is filed.

## 1 Protected Elder or Dependent Adult

a. Full Name: \_\_\_\_\_

☐ Person requesting protection for the elder or dependent adult, if different (*person named in item ③ of Form EA-100*):

Full Name: \_\_\_\_\_

Lawyer for person named above (*if any for this case*):Name: **Self-Represented** State Bar No.: \_\_\_\_\_Firm Name: **Self-Represented**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.*):

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Court name and street address:

Superior Court of California, County of

Santa Clara  
191 N. First St.  
191 N. First St.  
San Jose, CA 95113

Fill in case number:

Case Number:

## 2 Restrained Person

Full Name: \_\_\_\_\_

Address (*if known*): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## 3 Request to Renew Restraining Order

I ask the court to renew the *Elder or Dependent Adult Abuse Restraining Order After Hearing* (Form EA-130). A copy of the order is attached.a. The order ends on (*date*): \_\_\_\_\_b. ☐ This is my first request to renew the order.☐ The order has been renewed \_\_\_\_\_ times.c. I want the order to be renewed for ☐ five years ☐ permanentlyd. 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.

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

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

Type or print your name

Sign your name

This is not a Court Order.





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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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. 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:**

Date received by court: \_\_\_\_\_

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

## ① Person You Want a Restraining Order Against

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\*Name: \_\_\_\_\_

Other names used: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Gender: \_\_\_\_\_

Marks, scars, or tattoos: \_\_\_\_\_

Driver's license (*number and state*): \_\_\_\_\_ SSN: \_\_\_\_\_

Vehicle type: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Plate number: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name of employer and address: \_\_\_\_\_

Does the person speak English?

☐ Yes

☐ No (*list language*): \_\_\_\_\_

☐ I don't know

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.*)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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: ☐ M ☐ F ☐ X (nonbinary) Race: \_\_\_\_\_

\*Age: \_\_\_\_\_

Date of Birth (month, day, year): \_\_\_\_\_

*(If the judge grants your restraining order, your information will be entered into California's law enforcement database. If you give your date of birth, it will also be entered into the federal law enforcement database. If your information is not in the federal law enforcement database, your restraining order may be more difficult to enforce outside of California.)*

Telephone: \_\_\_\_\_

Do you speak English?

☐ Yes

☐ No (list language): \_\_\_\_\_

**4 Other People You Want Protected**

\*Name: \_\_\_\_\_ \*Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\*Name: \_\_\_\_\_ \*Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\*Name: \_\_\_\_\_ \*Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\*Name: \_\_\_\_\_ \*Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

☐ Check here if you have more people to list. Write them on a separate piece of paper, write "Item 4" at the top, and attach it to this form.

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

**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 [selfhelp.courts.ca.gov/sheriff-serves](http://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):

Fill in case number:

**Court Case Number:**

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

**1 To the Sheriff or Marshal of (name of county):** \_\_\_\_\_

**2 Your Information**

a. Your name (party requesting service): \_\_\_\_\_

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

Name: **Self-Represented**

Firm 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 lawyer, give the lawyer's information.)

Address to receive mail: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone number (optional): \_\_\_\_\_ Email address (optional): \_\_\_\_\_

**CONFIDENTIAL**

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



### 3 Information About Person or Entity You Want Served

(Check a or b)

- a. ☒ I ask the sheriff to serve a person (complete section below)

(1) Name of person: \_\_\_\_\_  
Nicknames or aliases (optional): \_\_\_\_\_

(2) Telephone number (optional): \_\_\_\_\_

(3) Can you describe the person?

☐ No, I do *not* have any information about the person's description.

☐ Yes (complete the section below with any information you have):

Gender: ☐ Male ☐ Female ☐ Nonbinary

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair color: \_\_\_\_\_ Eye color: \_\_\_\_\_

Date of birth or age (give estimate, if unknown): \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Special marks or features (tattoos, scars, etc.): \_\_\_\_\_

Vehicle (type, model, year, color, plate number): \_\_\_\_\_

☐ Check here if you are including a picture of the person.

(4) Do you know of any safety or accessibility issues?

☐ No

☐ Yes (complete the section below with any information you have):

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 you know about:

\_\_\_\_\_  
\_\_\_\_\_

- b. ☐ I ask the sheriff to serve an entity (examples: business or government agency)

(1) Name and type of entity: \_\_\_\_\_  
Telephone number (optional): \_\_\_\_\_

(2) If there is a specific person who should be served, give name: \_\_\_\_\_

(3) If there is an agent for service of process, give name: \_\_\_\_\_

(4) List any safety or accessibility issues (examples: weapons, aggressive animals, language barrier):

\_\_\_\_\_

**CONFIDENTIAL**

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



**4 Address Where Person or Entity Should Be Served**

*(The sheriff typically serves during normal business hours. Check with the sheriff's office for the exact times.)*

Address: \_\_\_\_\_ ☐ Home ☐ Business

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Gate code or special instructions: \_\_\_\_\_

Best time to serve at this address *(example: 8 a.m.–noon)*: \_\_\_\_\_

☐ Check here if the person is in jail or prison *(give name of facility)*: \_\_\_\_\_

*Alternate address (optional)*

*(If the person cannot be found at the address listed above, some sheriffs may try a second address if it's in the same county. If you have a second address for the person you want served, complete the section below.)*

Address: \_\_\_\_\_ ☐ Home ☐ Business

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Gate code or special instructions: \_\_\_\_\_

Best time to serve at this address *(example: 8 a.m.–noon)*: \_\_\_\_\_

**5 Information About Your Request**

- a. What type of court papers are you giving the sheriff to serve *(examples: summons, restraining order, eviction, small claims, bank levy, or writ of attachment)*?

**Restraining Order**

- 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 form number, give the title of the document. The court may have ordered you to serve certain papers. Look at the court's order and list all forms required. If you do not know which papers you need to serve, ask a lawyer, or contact your local self-help center for free information.)*

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

☐ I don't know

☐ No

☐ Yes *(if yes, give date of hearing)*: \_\_\_\_\_

**CONFIDENTIAL**

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



- 5 d. Is there a deadline for service?
- ☐ I don't know
- ☐ No
- ☐ Yes (if yes, give deadline): **5 days before hearing date**
- e. Has the court allowed you to serve your court papers in another way besides personal service (example: substituted service)?
- ☐ I don't know
- ☐ No
- ☐ Yes (if yes, include a copy of the order allowing another type of service)
- f. Is there any other information you want or need to give to the sheriff to serve your court papers?
- ☐ No
- ☐ Yes (if yes, give information below):
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## 6 Enforcement of Writ or Levy

**If you want the sheriff to enforce a writ or levy, you must complete form SER-001A, *Special Instructions for Writs and Levies—Attachment*, and turn it in with this form.**

*(Only complete this section if you want the sheriff to enforce a writ or levy.)*

Do you want the sheriff to both serve your court papers and act as levying officer?

- ☐ Yes
- ☐ No. I only want the sheriff to act as levying officer. A registered process server has or will serve my papers.

**Your Signature** (party asking for service, or their lawyer)

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

\_\_\_\_\_

Type or print your name



\_\_\_\_\_

Sign your name (may be electronic)

**CONFIDENTIAL**

**This is not a court form. 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). You can turn in your papers in person or send them electronically.
- 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 [selfhelp.courts.ca.gov/](http://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.**