

Santa Clara County
Superior Court

SAMPLE

**Civil Harassment Forms
(Restraining Order)**

Updated 5/2025

IMPORTANT:

If you are 65 or older do not complete this packet, ask staff about filing an Elder Abuse Restraining Order instead. Elder Abuse includes but is not limited to physical violence, threats of physical violence, harassment and financial abuse. It may offer additional protection not available through a Civil Harassment Restraining order and there is no fee to file an Elder Abuse Restraining Order.

Ask staff for more information.

State Bar

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.

Your legal name
Your address

EMAIL ADDRESS:
ATTORNEY FOR (Name):

SUPERIOR COURT OF CALIFORNIA, COUNTY OF

STREET ADDRESS:
MAILING ADDRESS:
CITY AND ZIP CODE:
BRANCH NAME:

CASE NAME:

Last Name vs. Last Name
(person who started this case goes first)

Court case #'s only
Do NOT use police card/report #'s

CIVIL CASE COVER SHEET

☒ **Unlimited** (Amount) ☐ **Limited** (Amount)

Complex Case Designation

☐ Counter ☐ Joinder

Filed with first appearance by defendant

IMPORTANT:

If you are 65 or older do not complete this packet,
ask staff about filing an Elder Abuse Restraining Order instead.

1. ☐ Uninsured motorist (16) ☐ Rule 3.740 collections (09) ☐ Construction defect (10)

Other PI/PD/WD (Personal Injury/Property Damage/Vandalism)

☐ Asbestos (17) ☐ Professional negligence (25) ☐ Medical malpractice (18) ☐ Other (19)

Non-PI/PD

☐ Business (20) ☐ Civil (21) ☐ Defamation (22) ☐ Fraud (23)

☐ Intellectual property (19) ☐ Drugs (38) ☐ Other (24)

Employment

☐ Wrongful termination (36) ☐ Other employment (15)

Judicial Review

☐ Asset forfeiture (05) ☐ Petition re: arbitration award (11) ☐ Writ of mandate (02) ☐ Other judicial review (39)

Miscellaneous Civil Petition

☐ Partnership and corporate governance (21) ☒ Other petition (not specified above) (43)

LEAVE BLANK

2. This case ☐ is ☒ is not complex under rule 3.400 of the California Rules of Court. If the case is complex, mark the factors
- a. ☐ b. ☐ c. ☐ Substantial amount of documentary evidence f. ☐ Substantial postjudgment judicial supervision
3. Remedies sought (check all that apply): a. ☐ monetary b. ☒ nonmonetary; declaratory or injunctive relief c. ☐ punitive
4. Number of causes of action (specify):
5. This case ☐ is ☒ is not a class action suit.
6. If there are any known related cases, file and serve a notice of related case. (You may use form CM-015.)

Date Today's date

Print your name

Sign your name

(TYPE OR PRINT NAME)

(SIGNATURE OF PARTY OR ATTORNEY FOR PARTY)

NOTICE

- Plaintiff must file this cover sheet with the first paper filed in the action or proceeding (except small claims cases or cases filed under the Probate Code, Family Code, or Welfare and Institutions Code). (Cal. Rules of Court, rule 3.220.) Failure to file may result in sanctions.
- File this cover sheet in addition to any cover sheet required by local court rule.
- If this case is complex under rule 3.400 et seq. of the California Rules of Court, you must serve a copy of this cover sheet on all other parties to the action or proceeding.
- Unless this is a collections case under rule 3.740 or a complex case, this cover sheet will be used for statistical purposes only.

INSTRUCTIONS ON HOW TO COMPLETE THE COVER SHEET

CM-010

To Plaintiffs and Others Filing First Papers. If you are filing a first paper (for example, a complaint) in a civil case, you **must** complete and file, along with your first paper, the Civil Case Cover Sheet contained on page 1. This information will be used to compile statistics about the types and numbers of cases filed. You must complete items 1 through 6 on the sheet. In item 1, you must check **one** box for the case type that best describes the case. If the case fits both a general and a more specific type of case listed in item 1, check the more specific one. If the case has multiple causes of action, check the box that best indicates the **primary** cause of action. To assist you in completing the sheet, examples of the cases that belong under each case type in item 1 are provided below. A cover sheet must be filed only with your initial paper. Failure to file a cover sheet with the first paper filed in a civil case may subject a party, its counsel, or both to sanctions under rules 2.30 and 3.220 of the California Rules of Court.

To Parties in Rule 3.740 Collections Cases. A "collections case" under rule 3.740 is defined as an action for recovery of money owed in a sum stated to be certain that is not more than \$25,000, exclusive of interest and attorney's fees, arising from a transaction in which property, services, or money was acquired on credit. A collections case does not include an action seeking the following: (1) tort damages, (2) punitive damages, (3) recovery of real property, (4) recovery of personal property, or (5) a prejudgment writ of attachment. The identification of a case as a rule 3.740 collections case on this form means that it will be exempt from the general time-for-service requirements and case management rules, unless a defendant files a responsive pleading. A rule 3.740 collections case will be subject to the requirements for service and obtaining a judgment in rule 3.740.

To Parties in Complex Cases. In complex cases only, parties must also use the Civil Case Cover Sheet to designate whether the case is complex. If a plaintiff believes the case is complex under rule 3.400 of the California Rules of Court, this must be indicated by completing the appropriate boxes in items 1 and 2. If a plaintiff designates a case as complex, the cover sheet must be served with the complaint on all parties to the action. A defendant may file and serve no later than the time of its first appearance a joinder in the plaintiff's designation, a counter-designation that the case is not complex, or, if the plaintiff has made no designation, a designation that the case is complex.

CASE TYPES AND EXAMPLES

Auto Tort

Auto (22)—Personal Injury/Property Damage/Wrongful Death
Uninsured Motorist (46) (*if the case involves an uninsured motorist claim subject to arbitration, check this item instead of Auto*)

Other PI/PD/WD (Personal Injury/Property Damage/Wrongful Death) Tort

Asbestos (04)
Asbestos Property Damage
Asbestos Personal Injury/Wrongful Death
Product Liability (*not asbestos or toxic/environmental*) (24)
Medical Malpractice (45)
Medical Malpractice—Physicians & Surgeons
Other Professional Health Care Malpractice
Other PI/PD/WD (23)
Premises Liability (e.g., slip and fall)
Intentional Bodily Injury/PD/WD (e.g., assault, vandalism)
Intentional Infliction of Emotional Distress
Negligent Infliction of Emotional Distress
Other PI/PD/WD

Non-PI/PD/WD (Other) Tort

Business Tort/Unfair Business Practice (07)
Civil Rights (e.g., discrimination, false arrest) (*not civil harassment*) (08)
Defamation (e.g., slander, libel) (13)
Fraud (16)
Intellectual Property (19)
Professional Negligence (25)
Legal Malpractice
Other Professional Malpractice (*not medical or legal*)
Other Non-PI/PD/WD Tort (35)

Employment

Wrongful Termination (36)
Other Employment (15)

Contract

Breach of Contract/Warranty (06)
Breach of Rental/Lease Contract (*not unlawful detainer or wrongful eviction*)
Contract/Warranty Breach—Seller Plaintiff (*not fraud or negligence*)
Negligent Breach of Contract/Warranty
Other Breach of Contract/Warranty
Collections (e.g., money owed, open book accounts) (09)
Collection Case—Seller Plaintiff
Other Promissory Note/Collections Case
Insurance Coverage (*not provisionally complex*) (18)
Auto Subrogation
Other Coverage
Other Contract (37)
Contractual Fraud
Other Contract Dispute

Real Property

Eminent Domain/Inverse Condemnation (14)
Wrongful Eviction (33)
Other Real Property (e.g., quiet title) (26)
Writ of Possession of Real Property
Mortgage Foreclosure
Quiet Title
Other Real Property (*not eminent domain, landlord/tenant, or foreclosure*)

Unlawful Detainer

Commercial (31)
Residential (32)
Drugs (38) (*if the case involves illegal drugs, check this item; otherwise, report as Commercial or Residential*)

Judicial Review

Asset Forfeiture (05)
Petition Re: Arbitration Award (11)
Writ of Mandate (02)
Writ—Administrative Mandamus
Writ—Mandamus on Limited Court Case Matter
Writ—Other Limited Court Case Review
Other Judicial Review (39)
Review of Health Officer Order
Notice of Appeal—Labor Commissioner Appeals

Provisionally Complex Civil Litigation (Cal. Rules of Court Rules 3.400–3.403)

Antitrust/Trade Regulation (03)
Construction Defect (10)
Claims Involving Mass Tort (40)
Securities Litigation (28)
Environmental/Toxic Tort (30)
Insurance Coverage Claims (*arising from provisionally complex case type listed above*) (41)

Enforcement of Judgment

Enforcement of Judgment (20)
Abstract of Judgment (Out of County)
Confession of Judgment (*non-domestic relations*)
Sister State Judgment
Administrative Agency Award (*not unpaid taxes*)
Petition/Certification of Entry of Judgment on Unpaid Taxes
Other Enforcement of Judgment Case

Miscellaneous Civil Complaint

RICO (27)
Other Complaint (*not specified above*) (42)
Declaratory Relief Only
Injunctive Relief Only (*non-harassment*)
Mechanics Lien
Other Commercial Complaint Case (*non-tort/non-complex*)
Other Civil Complaint (*non-tort/non-complex*)

Miscellaneous Civil Petition

Partnership and Corporate Governance (21)
Other Petition (*not specified above*) (43)
Civil Harassment
Workplace Violence
Elder/Dependent Adult Abuse
Election Contest
Petition for Name Change
Petition for Relief From Late Claim
Other Civil Petition

<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> Your legal name Your address </div> <small>ATTORNEY FOR (Name):</small> 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 10px;">Your legal name</div> Person From Whom Protection is Sought: <div style="border: 1px solid black; padding: 2px 10px;">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 telephone number.)

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
 - I HAVE given notice to the opposing party and/or their attorney by the following method:

LEAVE THIS SECTION BLANK

- 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: _____
- 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

Date

Print your legal name

Print Name

Sign your 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

① Person Seeking Protection

a.

Your legal name

Your Lawyer (if you have one for this case):

Name: **Self-Represented** State Bar No.:Firm Name: **Self-Represented**

Note: If your are 65 or older, ask staff about an Elder Abuse Restraining Order.

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, do not

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.

Email Address:

Fill in court name and street address:

Superior Court of California, County of Santa Clara
 Street: 191 N. First St., San Jose, CA 95113
 Mail: 191 N. First St., San Jose, CA 95113
 Civil Division

Court fills in case number when form is filed.

COURT CASE #'s ONLY
 DO NOT USE POLICE CARD/REPORT #'s

② Person From Whom Protection Is Sought

Restrained Person's legal name

The court will complete the rest of this form.

③ Notice of Hearing

A court hearing is scheduled on the request for restraining orders against the person in ②:

Name and address of court if different from above:

191 N. First Street

San Jose, CA 95113

Civil Division

Hearing Date

→ Date: _____ Time: _____

Leave blank, clerk will fill out

To the person in ②

- If you attend the hearing (in person, by phone, or by videoconference) and the judge grants a restraining order against you, the order will be effective immediately, and you could be arrested if you violate the order.
- If you do not attend the hearing, the judge may still grant the restraining order that could last up to five years. After you receive a copy of the order, you could be arrested if you violate the order.

④ Terms

a.

Leave Blank

The Judge will fill this to let you know whether the court granted, partially granted or denied your Temporary Restraining Order request pending the hearing.

(notice.)

CH-100, Request

(2) ☐ All **DENIED** until the court hearing. (Specify reasons for denial in b, below.)(3) ☐ Partly **GRANTED** and partly **DENIED** until the court hearing. (Specify reasons for denial in b, below.)

- b. Reasons for denial of some or all of those personal conduct and stay-away orders as requested in form CH-100, *Request for Civil Harassment Restraining Orders*

(1) ☐

(2) ☐

Leave Blank

The Judge will fill this out letting you know whether the court granted, partially granted or denied your Temporary Restraining Order request pending the hearing.

ence, or a
substantial

5 Confidential Information Regarding Minor

a. ☐

Leave Blank

If you asked to have information about minor children listed in this paperwork

ATED. (See
orm.)

b. If the

kept confidential by filling out form CH-160, the court will indicate here if the request was granted.
fine of up to \$1,000 or other court penalties.

5) must be
tion, with a

6 Service of Documents for the Person in ①

At least ☒ five ☐ _____ days before the hearing, someone age 18 or older—not you or anyone to be protected—must personally give (serve) a court's file-stamped copy of this form CH-109 to the person in ② along with a copy of all the forms indicated below:

- a. CH-100, *Request for Civil Harassment Restraining Orders* (file-stamped)
b. ☐ CH-110, *Temporary Restraining Order* (file-stamped) **IF GRANTED**
c. CH-120, *Response to Request for Civil Harassment Restraining Orders* (blank form)
d. CH-120-INFO, *How Can I Respond to a Request for Civil Harassment Restraining Orders?*
e. ☐ CH-170, *Notice of Order Protecting Information of Minor* and CH-165, *Order on Request to Keep Minor's Information Confidential* (file-stamped) **IF GRANTED**
Decl. Re: Notice Upon Ex Parte Application for orders for Civil Harassment (CV-5014);
f. ☒ Other (specify): How Do I Turn In or Sell My Firearms? (CH-800-INFO); Local form FM-1047

Date:

Leave Blank

Leave Blank

Judicial Officer

To the Person in ① :

- The court cannot make the restraining orders after the court hearing unless the person in ② has been personally given (served) a copy of your request and any temporary orders. To show that the person in ② has been served, the person who served the forms must fill out a proof of service form. Form CH-200, *Proof of Personal Service*, may be used.
- For information about service, read form CH-200-INFO, *What Is "Proof of Personal Service"?*
- You may ask to reschedule the hearing if you are unable to find the person in ② and need more time to serve the documents, or for other good reasons. Read form CH-115-INFO, *How to Ask for a New Hearing Date*.
- You must attend the hearing if you want the judge to make any of the orders you requested on form CH-100, *Request for Civil Harassment Restraining Orders*. Bring any evidence or witnesses you have. For more information, read form CH-100-INFO, *Can a Civil Harassment Restraining Order Help Me?*

To the Person in ② :

- If you want to respond to the request for orders in writing, file form CH-120, *Response to Request for Civil Harassment Restraining Orders*, and have someone age 18 or older—**not you or anyone to be protected**—mail it to the person in ①.
- The person who mailed the form must fill out a proof of service form. Form CH-250, *Proof of Service by Mail*, may be used. File the completed form with the court before the hearing and bring a copy with you to the court hearing.
- Whether or not you respond in writing, go to the hearing if you want the judge to hear from you before making an order. You may tell the judge why you agree or disagree with the orders requested.
- You may bring witnesses and other evidence.
- At the hearing, the judge may make restraining orders against you that could last up to five years and may order you to turn in to law enforcement, or sell to or store with a licensed gun dealer, any firearms (guns) and firearm parts that you own or possess. This includes firearm receivers and frames, and any item that may be used as or easily turned into a receiver or frame (see Penal Code section 16531). If an order is granted, you will also be prohibited from owning, possessing, or buying body armor and will have to relinquish any body armor you have.
- If you are unable to attend your court hearing or need more time to prepare your case, you may ask to reschedule your court date. Read form CH-115-INFO, *How to Ask for a New Hearing Date*.



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 *Disability Accommodation Request* (form MC-410). (Civ. Code, § 54.8.)

(Clerk will fill out this part.)

—Clerk's Certificate—

I certify that this *Notice of Court Hearing* is a true and correct copy of the original on file in the court.

Clerk's Certificate
[seal]

Date: _____

Clerk, by _____, Deputy

Person in ① must complete items ①, ②, and ③ only.

Note: If you are 65 or older, ask staff about an Elder Abuse Restraining Order.

① Protected Person

a. Your Full Name: **Your Legal Name**

Your Lawyer (if you have one for this case):

Name: **Self-Represented** State Bar No.: _____

Firm Name: **Self-Represented**

b. You Add _____ (If you are a minor, you must have a parent or guardian.)

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.

Fill in court name and street address:

Superior Court of California, County of Santa Clara

Street: 191 N. First St., San Jose, CA 95113

Mail: 191 N. First St., San Jose, CA 95113

Court fills in case number when form is filed.

Court case #'s only

Do NOT use police card/report #'s

② Restrained Person

(Give all the information you know. Information with a star (*) is required to add this order to the California police database. If age is unknown, give an estimate.)

*Full Name: **Restrained Person's Legal Name, Age and Date of Birth**

*Race: **The Other Party's Description, make your best guess when describing them.**

*Gender: ☐ Male ☐ Female ☐ Transgender ☐ Nonbinary ☐ Other _____

City: _____ How do you know the Other Party?

Relationship: _____ (example: neighbor, friend's friend, former friend, co-worker, maternal uncle, paternal aunt, cousin, classmate,...etc.)

③ Additional Protected Persons

In addition to ①, the following family or household members of that person are protected by the temporary orders indicated below:

Mark, if needed

Full Name _____ Gender _____ Age _____ Household Member? _____ Relation to Protected Person _____

List additional people, who live with you, that also need protection from the other party.

☐ **Check here if there are more than 3 people you are protecting that live in your home, mark this box and attach a sheet with their information on it. Ask staff for the attachment.**

④ Expiration Date

The court will complete the rest of this form.

This Order expires at the end of the hearing scheduled for the date and time below:

Date: _____

Leave Blank

(The court clerk will fill this out)

☐ a.m. ☐ p.m.

This is a Court Order.

Complete items 5 - 9 to ask for the orders you want in place until your hearing date.

Court case #'s only
Do NOT use police card/report #'s

Do **not** check "Denied Until the Hearing" or "Granted as Follows", those are for the Judge to complete.
Check "Not Requested" next to any orders you are not requesting.

If you do not obey these orders, you can be arrested, pay a fine of up to \$1,000, or both.

5 Personal Conduct Orders

☐ **Not Requested** ☐ **Denied Until the Hearing** ☐ **Granted as Follows:**

a. You must **not** do

Check here if you listed other protected persons in item (3).

☐ and to the other protected persons listed in **(3)** :

(1) ☒ Harass, intimidate, molest, attack, strike, stalk, threaten, assault (sexually or otherwise), hit, abuse, destroy personal property of, or disturb the peace of the person.

(2) ☐ Contact the person, either directly or indirectly, in **any** way, including, but not limited to, in person, by telephone, or by other means.
Check item (2), if you do not want the restrained person to contact you in ANY way.
Check item (3), if you do not want the restrained person to try to locate you.

(3) ☐ Take any action to obtain the person's address or location. If this item (3) is not checked, the court has found good cause not to make this order.

(4) ☐ Other (*specify*):

☐ Other personal conduct orders are attached at the end of this Order on Attachment 5a(4).

b. Peaceful written contact through a lawyer or a process server or other person for service of legal papers related to a court case is allowed and does not violate this order. However, you may have your papers served by mail on the person in **(1)**.

6 Stay-Away Order

Only check this box if you do NOT want a stay away order, otherwise leave these boxes blank.

☐ **Not Requested** ☐ **Denied Until the Hearing** ☐ **Granted as Follows:**

a. You must stay at least _____ yards away from (*check all that apply*):

(1) **The max distance you may ask for is up to 300 yards (3 football fields)(1 yard = 3 feet, 36 inches). Mark all the boxes you want the other person to stay away from.**

(4) **If the other party lives with you, you must ask for a reasonable distance so the other party may continue to live in the home. This type of restraining order cannot move people out of your home.**

(6) **If the other party lives near you, you cannot prevent them from going to the edge of their property line, driving to and from their home, getting mail, or parking on street/driveway, being in their yards or garage. You will have to request a distance that is reasonable.**

7 No Restraining Order

a. You must stay at least _____ yards away from (*check all that apply*):
There is NO STANDARD number, it is all case-by-case depending on your home location. If you are unsure, ask staff for clarification.

This is a Court Order.



- 7 b. **Prohibited items are:**
- (1) Firearms (guns);
 - (2) Firearm parts, meaning receivers, frames, or any item that may be used as or easily turned into a receiver or frame (see Penal Code section 16531); and
 - (3) Ammunition.
- c. You must:
- (1) Sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any firearms (guns) and firearm parts in your immediate possession or control. This must be done within 24 hours of being served with this Order.
 - (2) File a receipt with the court within 48 hours of receiving this Order that proves that your firearms (guns) and firearm parts have been turned in, sold, or stored. (You may use *Receipt for Firearms and Firearm Parts* (form CH-800) for the receipt.)
- d. ☐ The court has received information that you own or possess a firearm (gun), firearm parts, or ammunition.

8 **No Body Armor**

You cannot own, possess, or buy body armor (defined in Penal Code section 16288). You must relinquish any body armor you have in your possession.

9 **Possession and Protection of Animals**

Only mark this box if you are NOT REQUESTING possession or protection of animals, otherwise leave these top boxes blank.

☐ Not Requested ☐ Denied Until the Hearing ☐ Granted as Follows (specify):

- a. ☐ The restrained person shall not possess, protect, or control any animal that is owned, possessed, or controlled by the restrained person.
- b. ☐ The restrained person shall not possess, protect, or control any animal that is owned, possessed, or controlled by the restrained person.
- Mark these boxes, and describe the animal (if any) you want to possess/protect from the Other Party.
- Write type, breed, color, gender, and description of animal.
- Fill in item "b" with the stay away distance, keep in mind the information provided on the previous page if the restrained person lives or works near you.
- conceal, molest, attack, strike, threaten, harm, or otherwise dispose of, the animals listed above.

10 **Other Orders**

Only mark this box if you are NOT REQUESTING any Other Orders, otherwise leave these top boxes blank.

☐ Not Requested (specify):

You may use this section to ask for orders not covered anywhere else in this form. This should be written as an order (ex. "The Restrained Person shall not..." or "The Restrained Person shall...").

☐ Additional orders are attached at the end of this Order on Attachment 10.

This is a Court Order.



To the Person in ① :

⑪ Mandatory Entry of Order Into CARPOS Through CLETS

This Order must be entered into the California Restraining and Protective Order System (CARPOS) through the California Law Enforcement Telecommunications System (CLETS). *(Check one):*

- a. ☐ The clerk will enter this Order and its proof-of-service form into CARPOS.
- b. ☒ The clerk will transmit this Order and its proof-of-service form to a law enforcement agency to be entered into CARPOS.
- c. ☐ By the close of business on the date that this Order is made, the person in ① or his or her lawyer should

Name _____

☐ _____

⑫ No Fee

The she _____

a. ☐ _____

b. ☐ _____

⑬ Number

Date: _____

LEAVE BLANK

Judicial Officer

Warnings and Notices to the Restrained Person in ②

You Cannot Have Firearms (Guns), Firearm Parts, or Ammunition

You cannot own, have, possess, buy or try to buy, receive or try to receive, or otherwise get any prohibited items listed in item 7b on page 3 while this Order is in effect. If you do, you can go to jail and pay a \$1,000 fine. You must sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any firearms (guns) and firearm parts that you have or control as stated in item ⑦ above. The court will require you to prove that you did so.

Notice Regarding Nonappearance at Hearing and Service of Order

If you have been personally served with this Temporary Restraining Order and form CH-109, *Notice of Court Hearing*, but you do not appear at the hearing either in person or by a lawyer, and a restraining order that is the same as this Temporary Restraining Order except for the expiration date is issued at the hearing, a copy of the order will be served on you by mail at the address in item ②.

If this address is not correct or you wish to verify that the Temporary Restraining Order was converted into a restraining order at the hearing without substantive change, or to find out the duration of the order, contact the clerk of the court.

This is a Court Order.



After You Have Been Served With a Restraining Order

- Obey all the orders.
- Read form CH-120-INFO, *How Can I Respond to a Request for Civil Harassment Restraining Orders?*, to learn how to respond to this Order.
- If you want to respond, fill out form CH-120, *Response to Request for Civil Harassment Restraining Orders*, and file it with the court clerk. You do not have to pay any fee to file your response if the Request claims that you inflicted or threatened violence against or stalked the person in ①.
- You must have form CH-120 served by mail on the person in ① or that person's attorney. You cannot do this yourself. The person who does the mailing should complete and sign form CH-250, *Proof of Service by Mail*. File the completed proof of service with the court clerk before the hearing date or bring it with you to the hearing.
- In addition to the response, you may file and have declarations served, signed by you and other persons who have personal knowledge of the facts. You may use form MC-030, *Declaration*, for this purpose. It is available from the clerk's office at the court shown on page 1 of this form or at www.courts.ca.gov/forms. If you do not know how to prepare a declaration, you should see a lawyer.
- Whether or not you file a response, you should attend the hearing. If you have any witnesses, they must also go to the hearing.
- At the hearing, the judge can make restraining orders against you that last for up to five years. Tell the judge why you disagree with the orders requested.

Instructions for Law Enforcement

Enforcing the Restraining Order

This order is enforceable by any law enforcement agency that has received the order, is shown a copy of the order, or has verified its existence on the California Restraining and Protective Orders System (CARPOS). If the law enforcement agency has not received proof of service on the restrained person, the agency must advise the restrained person of the terms of the order and then must enforce it. Violations of this order are subject to criminal penalties.

Start Date and End Date of Orders

This order *starts* on the date next to the judge's signature on page 4. The order *ends* on the expiration date in item ④ on page 1.

Arrest Required if Order Is Violated

If an officer has probable cause to believe that the restrained person has notice of the order and has disobeyed the order, the officer must arrest the restrained person. (Pen. Code, §§ 836(c)(1), 13701(b).) A violation of the order may be a violation of Penal Code section 166 or 273.6. Agencies are encouraged to enter violation messages into CARPOS.

This is a Court Order.



Notice/Proof of Service

The law enforcement agency must first determine if the restrained person had notice of the order. Consider the restrained person “served” (given notice) if (Pen. Code, § 836(c)(2)):

- The officer sees a copy of the Proof of Service or confirms that the Proof of Service is on file; or
- The restrained person was informed of the order by an officer.

An officer can obtain information about the contents of the order and proof of service in CARPOS. If proof of service on the restrained person cannot be verified, the agency must advise the restrained person of the terms of the order and then enforce it.

If the Protected Person Contacts the Restrained Person

Even if the protected person invites or consents to contact with the restrained person, this order remains in effect and must be enforced. The protected person cannot be arrested for inviting or consenting to contact with the restrained person. The order can be changed only by another court order. (Pen. Code, § 13710(b).)

Conflicting Orders—Priorities for Enforcement

If more than one restraining order has been issued protecting the protected person from the restrained person, the orders must be enforced in the following priority (see Pen. Code, § 136.2 and Fam. Code, §§ 6383(h)(2), 6405(b)):

1. *Emergency Protective Order (EPO)*: If one of the orders is an *Emergency Protective Order* (form EPO-001), provisions (e.g., stay-away order) that are more restrictive than in the other restraining/protective orders must be enforced. Provisions of another order that do not conflict with the EPO must be enforced.
2. *No-Contact Order*: If a restraining/protective order includes a no-contact order, the no-contact order must be enforced. Item 5a(2) is an example of a no-contact order.
3. *Criminal Protective Order (CPO)*: If none of the orders include an EPO or a no-contact order, the most recent CPO must be enforced. (Fam. Code, §§ 6383(h)(2) and 6405(b).) Additionally, a CPO issued in a criminal case involving charges of domestic violence, Penal Code sections 261, 261.5, or former 262, or charges requiring sex offender registration must be enforced over any civil court order. (Pen. Code, § 136.2(e)(2).) All provisions in the civil court order that do not conflict with the CPO must be enforced.
4. *Civil Restraining Orders*: If there is more than one civil restraining order (e.g., domestic violence, juvenile, elder abuse, civil harassment), then the order that was issued last must be enforced. Provisions that do not conflict with the most recent civil restraining order must be enforced.

(Clerk will fill out this part.)

Clerk's Certificate
[seal]

LEAVE BLANK

I certify that this *Temporary Restraining Order* is a true and correct copy of the original on file in the court.

Date: _____ Clerk, by _____, Deputy

This is a Court Order.

Read *Can a Civil Harassment Restraining Order be Filed?* [INFO](#) before completing this form. Also see *Information* (form [CLETS-001](#) with as n

The Restrained Person will see this application.

Do not write or attach anything that you do not want them to see.

1 Person Seeking Protection

a. Your Full Name:

Your Legal Name

Your Age?

Your Lawyer (if you have one for this case)

Name: **Self-Represented**

State Bar No.: _____

Firm Name: **Self-Represented**

Fill in court name and street address:

Superior Court of California, County of

Santa Clara

Street: 191 N. First St., San Jose, CA 95113

Mail: 191 N. First St., San Jose, CA 95113

- 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 email.)

Address: _____

City: _____

Telephone: _____

Email Address: _____

Write a mailing address that is safe for the other party to see, unless they know it already.

Court fills in case number when form is filed.

Court case #'s only

Do NOT use police card/report #'s

2 Person From

Restrained Person's Legal Name

Full Name: _____

Age: _____

Their Age?

Address (if _____)

Restrained Person's Address, if you know it.

City: _____

Mark one

3 Additional Protected Persons

- a. Are you asking for protection for any other family or household members? ☐ Yes ☐ No If yes, list them:

Full Name

Gender

Age

Lives with you? How are they related to you?

List additional people, who live with you, that also need protection from the other party (must match CH-110, Item 3).

☐ Yes ☐ No

- ☐ Check here if the "Additional Protected Persons" for a title.

If you have more than 4 people you are protecting that live in your home, mark this box and attach a sheet with their information on it. Ask staff for the attachment.

- b. Why do these people need protection?

- ☐ Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 3b—Why Others Need Protection" for a title.

If you listed people above (besides yourself), explain why they need protection from the other party too.

This is not a Court Order.

4 Relationship of Parties

How do you know the person in (2)?

☐ Check all that apply (example: neighbor, friend's friend, former friend, co-worker, maternal uncle, paternal aunt, cousin, classmate,...etc.)

How do you know the Restrained Person?
(example: neighbor, friend's friend, former friend, co-worker, maternal uncle, paternal aunt, cousin, classmate,...etc.)

5 Venue

Why are you filing in this county? (Check all that apply):

- a. ☐ The person in (2) lives in this county.
b. ☐ I was harassed by the person in (2) in this county.
c. ☐ Other (specify): _____

Check all that apply

6 Other Court Cases

a. Have you or any of the persons in (2) filed any court cases with the court in this county?

☐ Yes ☐ No (If yes, check one box)
Kind of Case

Mark one and fill info below (if needed).

Mark yes, if there have been any court cases between you, your additional protected persons and the other party.

- (1) ☐ Civil Harassment
(2) ☐ Domestic Violence
(3) ☐ Divorce, Nullity, Legal Separation
(4) ☐ Paternity, Parentage, Child Custody
(5) ☐ Elder or Dependent Adult Abuse
(6) ☐ Eviction
(7) ☐ Guardianship
(8) ☐ Workplace Violence
(9) ☐ Small Claims
(10) ☐ Criminal
(11) ☐ Other (specify): _____

person in (2)?

is filed.)

Case Number (if known)

b. Are there now any protective or restraining orders in effect relating to you or any of the persons in (3) and the person in (2)? ☐ No ☐ Yes (If yes, Mark one)

Mark one

7 Description of Harassment

Harassment means violence or threats of violence against you, or a course of conduct that seriously alarmed, annoyed, or harassed you and caused you substantial emotional distress. A course of conduct is more than one act.

a. Tell the court about the last time the person in (2) harassed you.

Date of Most Recent Abuse

(1) When did it happen? (provide date or estimated date):

(2) What happened?

Don't fill information out here.
You will include this information in the lined paper that is attached.

This is not a Court Order.



- 7 a. (3) How did the person in (2) harass you? (Explain below):
☐ Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 7a(3)—Describe Harassment" for a title.

Don't fill information out here.

You will include this information in the lined paper that is attached.

- (4) Did the person in (2) use or threaten to use a gun or any other weapon?

☐ Yes ☐ No (If yes, explain below):

Mark one

☐ Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 7a(4)—Use of Weapons" for a title.

If yes, explain what kind of gun or weapon the other party threatened you with and how they did it.

- (5) Were you harmed or injured because of the harassment?

Mark one

☐ Yes ☐ No (If yes, explain below):

☐ Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 7a(5)—Harm or Injury" for a title.

If yes, explain how you were harmed by the other party

- (6) Did the police come? ☐ Yes ☐ No

Mark one

If yes, did they give you or the

If yes, the order protects (check)

If yes, mark one

Protective Order? ☐ Yes ☐ No

☐ Me ☐ The person in (2) ☐ The persons in (3).

(Attach a copy of the order if you have one.)

- b. Has the person in (2) harassed you at other times?

Mark one

☐ Yes ☐ No (If yes, describe prior incidents and provide dates of harassment below):

Give example of how often the other party has harassed you other times.

Some Examples:

The other party texted me 48 times in one hour between 1AM-2 AM on 2/14/2021.

The other party writes me lots of letters/emails, they wrote 20 on 2/14/2021.

They knock on my door at all hours, they came on 12/14, 12/15, 12/19/2024 at 2 AM....etc

Be very specific and clear.



Check the orders you want. ☒

8 ☐ **Personal Conduct Orders**

I ask the court to order the person in **(2)** not to do any of the following things to me or to any person to be protected listed in **(3)** :

- a. ☐ H
p
b. ☐ C
t
o
c. ☐ C
☐

Select what type of permanent protection you are seeking, this could be approved for up to 5 years.

This has to be filled out, don't leave blank.

Mark all the boxes if you don't want the Restrained Person to contact you in any way. If you want to be able to have peaceful contact, only mark box "a".

title.

You may ask for other conduct orders not covered above. You must write it in the form of an order (ex. "Restrained person shall not...").

*The person in **(2)** will be ordered not to take any action to get the addresses or locations of any protected person unless the court finds good cause not to make the order.*

9 ☐ **Stay-Away Orders**

- a. I

If you are asking for a stay away order, check boxes (1) - (9) as to the people/places you want protected.

You may ask for up to 300 yards (3 football fields) (1 yard = 3 feet, 36 inches).

NOTE: This judge cannot make the Restrained Person move away, quit their job or school. If they live/work/go to school near you, you have to ask for a reasonable distance that allows them to still get to and from their home, to their workplace, attend school, park on the street, get their mail, go to the edge of their property line, etc. Ask staff if you need help with this.

- b. If the court orders the person in **(2)** to stay away from all the places listed above, will he or she still be able to get to his or her home, school, or job? ☐ Yes ☐ No **Mark one** (If no):
☐ Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 9b - Stay-Away Orders" for a title.

If you marked no (above), explain how they will be prevented from getting to their home, school, or job.

10 **Firearms (Guns), Firearm Parts, and Ammunition**

Does the person in **(2)** own or possess any firearms (guns), firearm parts, or ammunition? This includes firearm receivers and frames, and any item that may be used as or easily turned into a firearm or frame (see Penal Code section 16531). ☐ Yes ☐ No ☐ I don't know **Mark one**

*If the judge grants a protective order, the person in **(2)** will be prohibited from owning, possessing, purchasing, receiving, or attempting to purchase or receive firearms (guns), firearm parts, and ammunition while the protective order is in effect. The person in **(2)** will also be ordered to turn in to law enforcement, or sell to or store with a licensed gun dealer, any firearms (guns) and firearm parts within their immediate possession or control. If an order is granted, the person in **(2)** will also be prohibited from owning, possessing, or buying body armor and would have to relinquish any they have.*

This is not a Court Order.



11 ☐ **Temporary Restraining Order**

I request that a Temporary Restraining Order (TRO) be issued against the person in ② to last until the hearing. I am presenting form CH-110, *Temporary Restraining Order*, for the court's signature together with this *Request*.

Has the person in ② been told to go to court to seek a TRO against him or her?

☐ Yes ☐ No (If you answered no, explain why below):

If you marked no, explain why you haven't told the Restrained Person why you are filling out this application against them. Example: I didn't tell them because they would go into hiding. I didn't tell them because it would cause me to be hurt by them...etc.

12 ☐ **Request to Give Less Than Five Days' Notice of Hearing**

This is rarely granted. If you marked #12 above, you are asking the court to allow you to serve this application to the other party fewer than five days before the hearing.

Example: the other person has a court appearance for another case 1 day before this hearing or the other person will be visiting from other town fewer than 5 days before hearing, explain that here.

13 **This application costs \$435 to file. There is a fee waiver attached to the end of this application. If you cannot afford the filing fee, complete the fee waiver application to see if you qualify. If you don't qualify, but the Restrained Person has physically harmed you or threatened to harm you or stalked you, the court may waive this fee.**

Mark the boxes that apply to explain why you shouldn't have to pay this filing fee. The judge will determine whether you have to pay for this fee after you turn in this application.

14 ☒ **Lawyer's Fees and Costs**

I ask the court to order payment of my ☐ lawyer's fees ☒ Court costs.

The amounts requested are:

<u>Item</u>	<u>Amount</u>	<u>Item</u>	<u>Amount</u>
Filing fee	\$ 435		\$
	\$		\$
	\$		\$

☐ Check here if there are more items. Put the items and amounts on the attached sheet of paper or form MC-025 and write "Attachment 14—Lawyer's Fees and Costs" for a title.

This is not a Court Order.



15 ☐ **Possession and Protection of Animals**

I ask the court to order the following:

a. ☐ That _____
(Identify)

I request
☐ Check
paper

Mark this box if there are any animals that live with you that you want possession of and/or protection for them.

If yes, mark the boxes in "a" and describe the animal (ex. "Fluffy, a brown and white lop-eared rabbit") then explain why you should have possession of the animal (ex. "I adopted Fluffy from a rescue and she is my rabbit").

Mark box "b" to ask for a stay away order from the animal. Remember to ask for a distance that will not keep the Restrained Person from their home, work, or school.

b. ☐ That the person in **(2)** must stay at least _____ yards away from, and not take, sell, transfer, encumber, conceal, molest, attack, strike, threaten, harm, or otherwise dispose of, the animals listed above.

16 ☐ **Additional Orders Requested**

I ask the court to make the following additional orders (*specify*):

☐ Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 16—Additional Orders Requested" for a title

You may complete this section, if you are asking for other orders that are not already requested in items 8-15. The must be written in the form of an order (ex. "Restrained Person shall not..." or "Restrained Person shall...").

17 Number of pages attached to this form, if any: _____

Count the number of pages attached to this form and write it here.

Date

Leave Blank

This is if an attorney is representing you.

I declare under penalty of perjury under the laws of the State of California that the information above and on all attachm

Date:

Today's Date
DD/MM/YY

Print Your Name

Type or print your name

Sign Your Name

Sign your name

This is not a Court Order.

Last Name vs. Last Name

(person who started this case goes first)

CAS

COURT CASE #S ONLY

DO NOT USE POLICE CARD/REPORT #S

CH-100, Attachment 7a(3) - DESCRIBE HARASSMENT:

a) **HOW DO YOU KNOW THE RESTRAINED PERSON?**

b) Are you **CHOOSE ONE** ☒ YES ☐ NO

c) Has the person ☐ physically abused you ☐ physically or verbally threatened you

CHECK ALL THAT APPLY

and/or ☐ harassed you many times? *(Please check all that are correct)*

d) In the **past three months**, what did the person do or say that made you afraid (please start with the most **recent** event and explain exactly what happened in detail, include

***READ THIS FIRST BEFORE FILLING
OUT THIS FORM!***

Describe everything that the Restrained Person has said or done to you to make you want this restraining order. The court will use this declaration to decide whether or not to grant a temporary and/or permanent restraining order.

Although the court is mainly interested in what has happened in the past three months, you should also write about past abuse. Write about the most recent abuse first.

You may also attach other documentation to help support what you are saying the other person is saying or doing to you (for example: text messages, emails, photos of personal injury or property damage, Facebook/Instagram postings, letters, etc).

IF YOU NEED MORE ROOM, ATTACH A REGULAR SHEET OF PAPER (NOT BINDER PAPER) OR ASK STAFF FOR EXTRA ATTACHMENTS.

Last Name vs. Last Name

(person who started this case goes first)

COURT CASE #S ONLY

DO NOT USE POLICE CARD/REPORT #S

READ AND CHECK ALL THAT APPLY
IN THE NEXT TWO PAGES
AND FILL IN REQUESTED INFORMATION

e) Were any guns or other weapons used or threatened to be used **during the abuse**
in the past three months? ☐ YES ☐ NO

If "YES", describe: _____

f) Were there any injuries during **abuse in the past three months**: ☐ YES ☐ NO If

"YES", describe: _____

g) Did the police come to any of these **recent events**? ☐ YES ☐ NO

h) Did they give you an Emergency Protective Order **for abuse in the past three**
months? ☐ YES ☐ NO *If YES, please attach a copy.*

i) Is the person you want to restrain in jail **right now** for violence against you?

☐ YES ☐ NO *If YES, where:* _____

j) Has the person you want restrained **ever** been in jail for violence against you or your
children? ☐ YES ☐ NO *If YES, when:* _____

Describe what the person did to you that caused them to go to jail:

Last Name vs. Last Name

(person who started this case goes first)

CA

COURT CASE #S ONLY

DO NOT USE POLICE CARD/REPORT #S

k) Do you have a criminal protective order (restraining order from criminal court)?

☐ YES ☐ NO *If YES, please attach a copy.*

l) Describe the **worst abuse** and **when** it happened:

☐ The most recent abuse is the worst abuse OR

WHAT WAS THE WORST ABUSE YOU
HAVE SUFFERED EVER IN YOUR WHOLE
RELATIONSHIP WITH THE RESTRAINED
PERSON?

m) Describe any other **previous** (past) violence or threats of violence that you haven't
already written about here (include dates or about when it happened):

**Was there any other past abuse
(even if it was a long time ago)?
If so, describe the past abuse here.**

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. If the judge grants the restraining order, information you give on this form will be entered into a 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: _____

COURT CASE #S ONLY

DO NOT USE POLICE CARD/REPORT #S

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

Date received by court: _____

Date this form is turned in

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 gender

DOB: _____

Gender: _____

Marks, scars, or tattoos: _____

Telephone: _____

Vehicle type: _____

Name of employer: _____

Does the person speak English? _____

Complete as much information as possible about the restrained person

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

☐ No

☐ Yes

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

2 *Your Name: **Your Name**

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

3 Your Information

***Age:** **Complete this section as fully as possible. The items in bold are mandatory.**

Race: _____

☐ X (nonbinary)

Do you speak English? ☐ Yes ☐ No (list language): _____

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.**

***Name:** _____

***Name:** _____

***Name:** _____

***Name:** _____

Gender: _____

Race: _____

Date of Birth: _____

***Gender:** _____

Race: _____

Date of Birth: _____

☐ Check

and attach

If you are asking to protect more than 4 additional people, ask the Restraining Order Help Center staff for an attachment.

of paper, write "Item 4" at the top,

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

FW-001 Request to Waive Court Fees

CONFIDENTIAL

Clerk stamps date here when form is filed.

**SAMPLE
ONLY
Do not write
on this copy!**

Fill in court name and street address:

Superior Court of California, County of Santa Clara

Fill in case number and name:

**Case Number:
YOUR CASE NUMBER, if you have one**

**Case Name:
PETITIONER'S NAME V. RESPONDENT'S NAME**

If you are getting public benefits, are a low-income person, or do not have enough income to pay for your household's basic needs and your court fees, you may use this form to ask the court to waive your court fees. The court may order you to answer questions about your finances. If the court waives the fees, you may still have to pay later if:

- You cannot give the court proof of your eligibility,
- Your financial situation improves during this case, or
- You settle your civil case for **\$10,000** or more. The trial court that waives your fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge you any collection costs.

1 Your Information (person asking the court to waive the fees):

Name: **YOUR NAME**
Street or mailing address: **YOUR ADDRESS**
City: _____ State: _____ Zip: _____
Phone: **YOUR PHONE NUMBER**

2 Your Job, if you have one (name, firm or affiliation, address, phone number, and State Bar number):

Name of employer: **WHO DO YOU WORK FOR?**
Employer's address: **WHERE IS YOUR WORK LOCATED?**

3 Your Lawyer, if you have one (name, firm or affiliation, address, phone number, and State Bar number):

a. The lawyer has agreed to advance all or a portion of your fees or costs (check one): Yes ☐ No ☐

b. (If yes, your lawyer must sign here) Lawyer's signature: _____
If your lawyer is not providing legal-aid type services based on your low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

4 What court's fees or costs are you asking to be waived?

- ☐ Superior Court (See Information Sheet on Waiver of Superior Court Fees and Costs (form FW-001-INFO).)
☐ Supreme Court, Court of Appeal, or Appellate Court Fees (See Information Sheet on Waiver of Appellate Court Fees (form FW-001-INFO).)

CHECK THE BOX(ES) BELOW THAT APPLY TO YOU

5 Why are you asking the court to waive your court fees?

- a. ☐ I receive (check all that apply; see Information Sheet on Waiver of Court Fees and Costs (form FW-001-INFO).)
☐ Food Stamps ☐ Supp. Sec. Inc.
☐ CalWORKS or Tribal TANF ☐ _____
b. ☐ My gross monthly household income is less than the amount listed below. (If you check 5b, you must fill out 7, 8, and 9 on the next page.)

Family Size	Family Income	Family Size
1	\$2,608.33	3
2	\$3,525.00	4

- c. ☐ I do not have enough income to pay my court fees. I ask the court to:

☐ waive all court fees and costs ☐ waive some of the court fees ☐ let me make payments over time

6 Check here if you asked the court to waive your court fees for this case in the last six months.

(If your previous request was denied, you must fill out this form and check here): ☐

I declare under penalty of perjury that the information I have provided on this form and all attachments is true and correct.

Date: **TODAY'S DATE**

PRINT YOUR NAME HERE

Print your name here

SIGN YOUR NAME HERE

Sign here

Your name: YOUR NAME

Case Number:

YOUR CASE NUMBER, if you have one

BELOW IS ONLY AN EXAMPLE OF HOW TO COMPLETE THIS FORM.
IF YOU CHECKED ITEM 5B, COMPLETE ITEMS 7, 8 AND 9.
IF YOU CHECKED ITEM 5C, COMPLETE THE ENTIRE PAGE.

7

If it does, complete the form based on your average income for the past 12 months.

8

Your Gross Monthly Income

a. List the source and amount of **any** income you get each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

(1)	Wages	\$	1,200
(2)	Child Support	\$	400
(3)		\$	
(4)		\$	

b. Your total monthly income: \$ 1,600

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Household Income

a. List the income of all other persons living in your home who depend in whole or in part on you for support, or on whom you depend in whole or in part for support.

	Name	Age	Relationship	Gross Monthly Income
(1)	Mary Smith	41	WIFE	\$ 700
(2)	Joe Smith Jr	10	SON	\$ 0
(3)				\$
(4)				\$

b. Total monthly income of persons above: \$ 700

Total monthly income and household income (8b plus 9b): \$ 2,300

To list any other facts you want the court to know, such as unusual medical expenses, etc., attach form MC-025 or attach a sheet of paper and write Financial Information and your name and case number at the top.

Check here if you attach another page. ☐

Important! If your financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010.

a. Cash \$ 20

b. All financial accounts (List bank name and amount):

(1)	Wells Fargo Checking	\$	200
(2)		\$	
(3)		\$	

c. Cars, boats, and other vehicles

	Make/Year	Fair Market Value	How Much You Still Owe
(1)	'01 Ford Explorer	\$ 3,000	\$ 0
(2)		\$	\$
(3)		\$	\$

d. Real estate

	Address	Fair Market Value	How Much You Still Owe
(1)	NONE	\$	\$
(2)		\$	\$

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.):

	Describe	Fair Market Value	How Much You Still Owe
(1)	NONE	\$	\$
(2)		\$	\$

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Your Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:

(1)	Federal Taxes	\$	150
(2)	State Taxes	\$	75
(3)	Insurance	\$	50
(4)		\$	

b. Rent or house payment & maintenance \$ 1175

c. Food and household supplies \$ 300

d. Utilities and telephone \$ 0

e. Clothing \$ 0

f. Laundry and cleaning \$ 0

g. Medical and dental expenses \$ 0

h. Insurance (life, health, accident, etc.) \$ 0

i. School, child care \$ 0

j. Child, spousal support (another marriage) \$ 0

k. Transportation, gas, auto repair and insurance \$ 0

l. Installment payments (list each below):

Paid to:

(1)	American Express	\$	150
(2)		\$	
(3)		\$	

m. Wages/earnings withheld by court order \$ 0

n. Any other monthly expenses (list each below).

Paid to:

		How Much?
(1)	Cell Phone	\$ 60
(2)		\$
(3)		\$

Total monthly expenses (add 11a–11n above): \$ 2,240

Order on Court Fee Waiver (Superior Court)

Clerk stamps date here when form is filed.

**SAMPLE
ONLY**
**Do not write
on this copy!**

1 Person who asked the court to waive court fees:

Name: YOUR NAMEStreet or mailing address: YOUR ADDRESS

City: _____ State: _____ Zip: _____

2 Lawyer, if person in 1 has one (name, firm name, address, phone number, e-mail, and State Bar number):

SELF-REPRESENTED

3 A request to waive court fees was filed on (date): DATE FILED

☐ The court made a previous fee waiver order in this case on (date): _____

Read this form carefully. All che

**CHECK AND COMPLETE IF YOU HAVE HAD
FEES WAIVED IN THIS CASE BEFORE**

Fill in court name and street address:

Superior Court of California, County of _____

Fill in case number and name:

Case Number:

YOUR CASE NUMBER, IF YOU HAVE ONE

Case Name:

PETITIONER'S NAME V. RESPONDENT'S NAME

Notice: The court may order you to answer questions about your finances and later order you to pay back the waived fees. If this happens and you do not pay, the court can make you pay the fees and also charge you collection fees. If there is a change in your financial circumstances during this case that increases your ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010.) If you win your case, the trial court may order the other side to pay the fees. If you settle your civil case for **\$10,000** or more, the trial court will have a lien on the settlement in the amount of the waived fees. The trial court may not dismiss the case until the lien is paid.

4 After reviewing the court may **LEAVE THE REST OF THIS PAGE BLANK** *al Court Fees*

a. ☐ The court **grants** your request, as follows:

(1) ☐ **Fee Waiver.** The court grants your request and waives your court fees and costs listed below. (*Cal. Rules of Court, rules 3.55 and 8.818.*) You do not have to pay the court fees for the following:

- Filing papers in superior court
- Making copies and certifying copies
- Sheriff's fee to give notice
- Reporter's fee for attendance at hearing or trial, if the court is not electronically recording the proceeding and you request that the court provide an official reporter
- Assessment for court investigations under Probate Code section 1513, 1826, or 1851
- Preparing, certifying, copying, and sending the clerk's transcript on appeal
- Holding in trust the deposit for a reporter's transcript on appeal under rule 8.130 or 8.834
- Making a transcript or copy of an official electronic recording under rule 8.835
- Court fee for phone hearing
- Giving notice and certificates
- Sending papers to another court department

(2) ☐ **Additional Fee Waiver.** The court grants your request and waives your additional superior court fees and costs that are checked below. (*Cal. Rules of Court, rule 3.56.*) You do not have to pay for the checked items.

- ☐ Jury fees and expenses
- ☐ Fees for court-appointed experts
- ☐ Other (specify): _____
- ☐ Fees for a peace officer to testify in court
- ☐ Court-appointed interpreter fees for a witness

Your name: YOUR NAME

Case Number:
YOUR CASE NUMBER, IF YOU HAVE ONE

b. ☐ The court

Warning
you filed

(1) Your request
on next

(2) ☐ The
request

LEAVE THE REST
OF THIS PAGE
BLANK

court papers
used.

see date of service ☐

the waiver you

The court has enclosed a blank *Request for Hearing About Court Fee Waiver Order (Superior Court)* (form FW-006). You have **10 days** after the clerk gives notice of this order (see date of service below) to:

- Pay your fees and costs in full or the amount listed in c below, or
- Ask for a hearing in order to show the court more information. (*Use form FW-006 to request hearing.*)

c. (1) ☐ The court needs more information to decide whether to grant your request. You must go to court on the date on page 3. The hearing will be about the questions regarding your eligibility that are stated:

☐ Below ☐ On Attachment 4c(1)

(2) ☐ Bring the items of proof to support your request, if reasonably available, that are listed:

☐ Below ☐ On Attachment 4c(2)

This is a Court Order.

Your name: YOUR NAME

Case Number:

YOUR CASE NUMBER, IF YOU HAVE ONE

Hearing
Date

Warning! If
request to w
process the
dismissed.

Date: _____

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ferent from above:

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Clerk, Deputy

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 for *Request for Accommodations by Persons With Disabilities and Response* (form MC-410). (Civ. Code, § 54.8.)

Clerk's Certificate of Service

I certify that I am not involved in this case and (*check one*):

- ☐ I handed a copy of this Order to the party and attorney, if any, listed in ① and ②, at the court, on the date below.
- ☐ This order was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in ① and ②, from (*city*): _____, California, on the date below.
- ☐ A certificate of mailing is attached.

Date: _____

Clerk, by _____, Deputy
Name: _____

This is a Court Order.