

JUDICIAL COUNCIL OF CALIFORNIA

455 Golden Gate Avenue · San Francisco, California 94102-3688
www.courts.ca.gov/policyadmin-invitationstocomment.htm

INVITATION TO COMMENT SPR17-22

Title	Action Requested
Protective Orders: Modification and Termination	Review and submit comments by April 28, 2017
Proposed Rules, Forms, Standards, or Statutes	Proposed Effective Date
Adopt forms CH-600, CH-610, CH-620, CH-630, EA-600, EA-610, EA-620, EA-630, SV-600, SV-610, SV-620, SV-630, WV-600, WV-610, WV-620, WV-630	January 1, 2018
Proposed by	Contact
Civil and Small Claims Advisory Committee	Jenny Wald
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Executive Summary and Origin

The Civil and Small Claims Advisory Committee proposes new forms relating to requests for the modification or termination of restraining orders. These forms will be available for use in proceedings to prevent civil harassment, elder and dependent adult abuse, private post-secondary school violence, and workplace violence.

Background

The statutes that govern the legal standards and procedures for issuance of restraining orders require that the Judicial Council “shall develop forms, instructions, and rules relating to matters governed by this section.” The statutes also provide that an “order issued after notice and hearing” is “subject to termination or modification” by “further order of the court” upon written stipulation or “request of a party.” (See Code Civ. Proc., §§ 527.6, 527.85; Welf. & Inst. Code § 1567.03).

The Proposal

- Adopt the forms numbered 600 to serve as the means by which a party asks for a modification or termination order;

The proposals have not been approved by the Judicial Council and are not intended to represent the views of the council, its Rules and Projects Committee, or its Policy Coordination and Liaison Committee. These proposals are circulated for comment purposes only.

- Adopt the forms numbered 610 to serve as the means by which a party provides notice of the hearing (and other required notices);
- Adopt the forms numbered 620 to serve as the means by which a party responds to a request to modify or terminate the orders; and
- Adopt the forms numbered 630 as the court order.

Request to Modify or Terminate Restraining Order (forms numbered 600)

The forms numbered 600 implement statutory requirements by serving as the means by which a party either protected or restrained by an order after hearing (forms numbered 130) can ask the court to modify or terminate the restraining orders.

Notice of Hearing to Modify or Terminate Restraining Order (forms numbered 610)

The forms numbered 610 serve as the means by which a party either protected or restrained by an order after hearing can provide the other party with notice of the hearing of a request for the court to modify or terminate the restraining orders.

Response to Request for Order Modifying or Terminating Restraining Order (forms numbered 620)

The forms numbered 620 implement the statutes by serving as the means by which a party protected or restrained by an order after hearing can respond to the request to modify or terminate the restraining orders.

Order Modifying or Terminating Restraining Order (forms numbered 630)

The forms numbered 630 implement the statutes by serving as the means by which the court may properly record its order after hearing a request to modify or terminate an order after hearing.

Alternatives Considered

The committee considered not taking any action but decided against that option.

Implementation Requirements, Costs, and Operational Impacts

Self-help centers and court staff may need training to recognize and understand the new forms. The hope is that, once initial training is completed, the new forms will be helpful for parties making the requests and ultimately benefit the courts. Should the forms be issued as part of electronic case management systems, the electronic forms will need to be revised within those systems.

Request for Specific Comments

In addition to comments on the proposal as a whole, the advisory committee [or other proponent] is interested in comments on the following:

- Does the proposal appropriately address the stated purpose?

The advisory committee also seeks comments from *courts* on the following cost and implementation matters:

- Would the proposal provide cost savings? If so please quantify.
- What would the implementation requirements be for courts?

Attachments

1. Forms CH-600, CH-610, CH-620, CH-630, EA-600, EA-610, EA-620, EA-630, SV-600, SV-610, SV-620, SV-630, WV-600, WV-610, WV-620, and WV-630, at pages 4– XXX

Clerk stamps date here when form is filed.

DRAFT
Not approved by the
Judicial Council
02.06.17

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

1 Party Seeking Modification/Termination

- a. Full Name: _____
- b. Protected person Restrained person
- c. Your Lawyer (if you have one for this case):
 Name: _____ State Bar No.: _____
 Firm Name: _____
- d. 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 Other Party

- a. Full Name: _____
- b. Address (if known): _____
 City: _____ State: _____ Zip: _____

3 Current Order

- a. The current order is a/an:
 Civil Harassment Restraining Order After Hearing (form CH-130)
 Order Renewing Civil Harassment Restraining Order (form CH-730)
- b. The current order expires on (date): _____
- c. A copy of the current order is attached.

4 Request to Modify Restraining Order

- a. I ask the court to modify the current order as follows (specify requested changes referring to the item number in order that you want to change or delete):
 Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 4a—Requested Changes" for a title. You may use form MC-025, Attachment.



6 **Lawyer's Fees and Costs**

I ask the court to order payment of my: a. Lawyer's fees b. Court costs

The amounts requested are:

<u>Item</u>	<u>Amount</u>	<u>Item</u>	<u>Amount</u>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

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 6—Lawyer's Fees and Costs" for a title.

Notice to the Restrained Person:

If you are requesting modification or termination of the restraining order, you must have the protected person personally served with this Request and file a proof of service with the court before the hearing. You may use form CH-200, *Proof of Personal Service*.

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

Notice of Hearing on Request to
 Modify **Terminate**
Civil Harassment Restraining Order

Clerk stamps date here when form is filed.

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Party seeking order completes items ① and ②.

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

① Party Seeking Modification/Termination

- a. Full Name: _____
- b. Your Lawyer (if you have one for this case):
Name: _____ State Bar No.: _____
Firm Name: _____
- c. 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 Other Party

- a. Full Name: _____
- b. Address (if known): _____
City: _____ State: _____ Zip: _____

③ Court Hearing

The judge has set a court hearing date. Court will fill in box below.

The current restraining order stays in effect unless terminated by the court.

Hearing Date →

Date: _____ Time: _____ Name and address of court if different from above: _____
 Dept.: _____ Room: _____ _____

To the Party Seeking Order:

④ Service

Someone age 18 or older—**not you**—must serve a copy of the following forms on the other party:

- CH-600, Request to Modify/Terminate Civil Harassment Restraining Order;
- CH-610, Notice of Hearing on Request to Modify/Terminate Civil Harassment Restraining Order (this form);
- CH-620, Response to Request to Modify/Terminate Civil Harassment Restraining Order (blank copy).



- The forms must be personally served on the other party _____ days before the hearing.
- The forms may be served by mail on the other party or the other party's attorney _____ days before the hearing.

The person who serves the forms must fill out either form CH-200, *Proof of Personal Service*, or form CH-250, *Proof of Service by Mail*. Have the person who served sign the original. Take the signed original proof-of-service form back to the court clerk for filing or bring it with you to the hearing. For help with personal service, see form CH-200-INFO, *What is "Proof of Personal Service"?*

Date: _____ Clerk, by _____, Deputy

To the Other Party:

If you wish to make a written response to this request to modify or terminate the current civil harassment restraining order, you may fill out form CH-620, *Response to Request to Modify/Terminate Civil Harassment 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 other party at the address in ① at least _____ days before the hearing. Also file form CH-250, *Proof of Service by Mail*, with the court before the hearing.

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 will fill out this part.)

—Clerk's Certificate—

I certify that this *Notice of Hearing on Request to Modify/Terminate Civil Harassment Restraining Order* is a true and correct copy of the original on file in the court.

Clerk's Certificate Date: _____
 [seal] Clerk, by _____, Deputy

Response to Request to
 Modify **Terminate**
Civil Harassment Restraining Order

Clerk stamps date here when form is filed.

Use this form to respond to the *Request to Modify or Terminate Civil Harassment Restraining Order* (form CH-600).

- Fill out this form and then take it to the court clerk.
- Have someone age 18 or older—**not you**—mail a copy of this form and any attached pages to the other party at the address in **(2)** below. Use form CH-250, *Proof of Service by Mail*.

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

The court will consider your response at the hearing. Write your hearing date, time, and place from form CH-610 item **(3)** here.

Hearing Date → Date: _____
Time: _____

Dept.: _____ Room: _____

(1) Party Filing Response

a. Your Full Name: _____

b. Protected person Restrained person

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

Name: _____ State Bar No.: _____

Firm Name: _____

c. 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. Law enforcement officer, give agency information.)

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

(2) Other Party

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

(3) Response

a. I agree to the Modification Termination of the order.

b. I do not agree to the Modification Termination
(Specify why you disagree in Item **(4)** on page 2.)

c. I agree to the following orders (specify below or in item **(4)** on page 2):



4 **Reasons I Do Not Agree to the** **Modification** **Termination**

Check here if there is not enough space below for your answer. Put your complete answer on an attached sheet of paper and write "Attachment 4—Reasons I Disagree" as a title. You may use form MC-025, Attachment.

5 **Lawyer's Fees and Costs**

a. 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>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

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 5—Lawyer's Fees and Costs" for a title.

b. I ask the court to deny the request of the other party that I pay his or her lawyer's fees and costs.

Date: _____

Lawyer's name, if you have one

▶ _____
Lawyer's signature

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

To the Party Filing This Response:

Have someone age 18 or older—**not you**—mail a copy of this completed form CH-620 to the other party or to the other party's lawyer, if any. This is called "service by mail." The person who serves the form by mail must fill out form CH-250, *Proof of Service by Mail*. Have the person who did the mailing sign the original. Take the signed original Proof of Service form back to the court clerk or bring it with you to the hearing.

Order on Request to
 Modify **Terminate**
Civil Harassment Restraining Order

Clerk stamps date here when form is filed.

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Judicial Council

Prevailing party completes items ① and ②.

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

① **Party Seeking Modification/Termination**

a. Full Name: _____

Lawyer (if any for this case):

Name: _____ State Bar No.: _____

Firm Name: _____

b. Address (If this party has a lawyer, give the lawyer's information.
If the party does not have a lawyer and wants to keep home
address private, give a different mailing address instead.
Telephone, fax, or e-mail are not required.

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

② **Other Party**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

③ **Hearing**

There was a hearing on (date): _____ at time: _____ a.m. p.m. Dept.: _____ Room: _____

(Name of judicial officer): _____ made the orders at the hearing.

These people were at the hearing:

a. The party seeking modification termination

b. The party opposing modification termination

c. The lawyer for the party seeking modification termination (name): _____

d. The lawyer for the party opposing modification termination (name): _____

④ **Order**

The request to modify terminate the attached

Civil Harassment Restraining Order After Hearing (form CH-130)

Order Renewing Civil Harassment Restraining Order (form CH-730)

originally issued on (date): _____ is:

a. **DENIED.** The order and expiration date remain the same.

This is a Court Order.



b. **DENIED** without prejudice because the other party was not served on time.

c. **GRANTED.**

(1) The order is **TERMINATED** as of the date this Order is signed on page 3.

(2) The order is **MODIFIED** as stated: Below On Attachment 4c(2)

(Specify, referring to item numbers in the original order):

(3) The order now **EXPIRES** on (date): _____ at (time): _____

5 **Lawyer's Fees and Costs**

The person in ___ must pay to the person in ___ the following amounts for:

a. Lawyer's fees b. Costs

<u>Item</u>	<u>Amount</u>	<u>Item</u>	<u>Amount</u>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Additional items and amounts are attached at the end of this Order on Attachment 5.

6 **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 prevailing party or his or her lawyer should deliver a copy of the Order and its proof-of-service form to the law enforcement agency listed below to enter into CARPOS:

Name of Law Enforcement Agency	Address (City, State, Zip)
_____	_____
_____	_____

Additional law enforcement agencies are listed at the end of this Order on Attachment 6.

This is a Court Order.



To the Prevailing Party:

7 Service of Order

If service is required, someone age 18 or older—**not you**—must serve a copy of this order on the other party. If a party is represented by a lawyer, you must serve the lawyer instead of the party.

- The other party attended the hearing. **No further service is required.**
- Order Granted**—The other party did not attend the hearing. **Service is required:** This Order:
 - must be personally served on the other party within _____ days of the date of this Order.
 - may be served by mail on the other party within 5 days of the date of this Order.
- Order Denied**—The other party did not attend the hearing. **Service by Mail:** The other party may be served with this Order by mail.

Date: _____

Judicial Officer

(Clerk will fill out this part.)

—Clerk's Certificate—

Clerk's Certificate
[seal]

I certify that this *Order on Request to Terminate Civil Harassment 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.

**Request to Modify Terminate
Elder or Dependent Adult Abuse
Restraining Order**

Clerk stamps date here when form is filed.

**DRAFT
Not approved by
the
Judicial Council
02.07.17**

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

1 Party Seeking Modification/Termination

- a. Full Name: _____
- b. Protected person Restrained person Conservator/Other
- c. Your Lawyer (if you have one for this case):
 Name: _____ State Bar No.: _____
 Firm Name: _____
- d. 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 Other Party

- a. Full Name: _____
- b. Address (if known): _____
 City: _____ State: _____ Zip: _____

3 Current Order

- a. The current order is an:
 Elder or Dependent Adult Abuse Restraining Order After Hearing (form EA-130)
 Order Renewing Elder or Dependent Adult Abuse Restraining Order (form EA-730)
- b. The current order expires on (date): _____
- c. A copy of the current order is attached.

4 Request to Modify Restraining Order

- a. I ask the court to modify the current order as follows (specify requested changes referring to the item number in order that you want to change or delete):
 Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 4a —Requested Changes" for a title. You may use form MC-025, Attachment.



6 **Lawyer's Fees and Costs**

I ask the court to order payment of my: a. Lawyer's fees b. Court costs

The amounts requested are:

<u>Item</u>	<u>Amount</u>	<u>Item</u>	<u>Amount</u>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

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 6—Lawyer's Fees and Costs" for a title.

Notice to the Restrained Person:

If you are requesting modification or termination of the restraining order, you must have the protected person personally served with this Request and file a proof of service with the court before the hearing. You may use form EA-200, *Proof of Personal Service*.

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

Notice of Hearing on Request to
 Modify **Terminate Elder or**
Dependent Adult Abuse Restraining Order

Clerk stamps date here when form is filed.

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Council

Party seeking order completes items ① and ②.

① Party Seeking Modification/Termination

- a. Full Name: _____
- b. Your Lawyer (if you have one for this case):
Name: _____ State Bar No.: _____
Firm Name: _____
- c. 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: _____

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

② Other Party

- a. Full Name: _____
- b. Address (if known): _____
City: _____ State: _____ Zip: _____

③ Court Hearing

The judge has set a court hearing date. *Court will fill in box below.*

The current restraining order stays in effect unless terminated by the court.

Hearing
Date →

- Date: _____ Time: _____ Name and address of court if different from above: _____
- Dept.: _____ Room: _____ _____
- _____
- _____

To the Party Seeking Order:

④ Service

Someone age 18 or older—**not you**—must serve a copy of the following forms on the other party:

- EA-600, *Request to Modify/Terminate Elder or Dependent Adult Abuse Restraining Order*;
- EA-610, *Notice of Hearing on Request to Modify/Terminate Elder or Dependent Adult Abuse Restraining Order* (this form);
- EA-620, *Response to Request to Modify/Terminate Elder or Dependent Adult Abuse Restraining Order* (blank copy).



- The forms must be personally served on the other party _____ days before the hearing.
- The forms may be served by mail on the other party or the other party's attorney _____ days before the hearing.

The person who serves the forms must fill out either form EA-200, *Proof of Personal Service*, or form EA-250, *Proof of Service by Mail*. Have the person who served sign the original. Take the signed original proof-of-service form back to the court clerk for filing or bring it with you to the hearing. For help with personal service, see form EA-200-INFO, *What is "Proof of Personal Service"?*

Date: _____ Clerk, by _____, Deputy

To the Other Party:

If you wish to make a written response to this request to modify or terminate the current elder or dependent adult abuse restraining order, you may fill out form EA-620, *Response to Request to Modify/Terminate Elder or Dependent Adult Abuse 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 other party at the address in ① at least _____ days before the hearing. Also file form EA-250, *Proof of Service by Mail*, with the court before the hearing.

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 will fill out this part.)

—Clerk's Certificate—

I certify that this *Notice of Hearing on Request to Modify/Terminate Elder or Dependent Adult Abuse Restraining Order* is a true and correct copy of the original on file in the court.

Clerk's Certificate Date: _____
 [seal] Clerk, by _____, Deputy

Response to Request to
 Modify **Terminate Elder or**
Dependent Adult Abuse Restraining Order

Clerk stamps date here when form is filed.

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Not approved by the
Judicial Council

02.07.2017

Use this form to respond to the *Request to Modify or Terminate Elder or Dependent Adult Abuse Restraining Order* (form CH-600).

- Fill out this form and then take it to the court clerk.
- Have someone age 18 or older—**not you**—mail a copy of this form and any attached pages to the other party at the address in (2) below. Use form CH-250, *Proof of Service by Mail*.

Fill in court name and street address:

Superior Court of California, County of

1 Party Filing Response

- a. Your Full Name: _____
- b. Protected person Restrained person Conservator/Other
- Your Lawyer (if you have one for this case):
- Name: _____ State Bar No.: _____
- Firm Name: _____

Fill in case number:

Case Number:

- c. 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. Law enforcement officer, give agency information.)

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

The court will consider your response at the hearing. Write your hearing date, time, and place from form EA-610 item (3) here.

Hearing → Date: _____
Date Time: _____

Dept.: _____ Room: _____

2 Other Party

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

3 Response

- a. I agree to the Modification Termination of the order.
- b. I do not agree to the Modification Termination
(Specify why you disagree in Item (4) on page 2.)
- c. I agree to the following orders (specify below or in item (4) on page 2):



4 **Reasons I Do Not Agree to the** **Modification** **Termination**

Check here if there is not enough space below for your answer. Put your complete answer on an attached sheet of paper and write "Attachment 4—Reasons I Disagree" as a title. You may use form MC-025, Attachment.

5 **Lawyer's Fees and Costs**

a. 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>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

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 5—Lawyer's Fees and Costs" for a title.

b. I ask the court to deny the request of the other party that I pay his or her lawyer's fees and costs.

Date: _____

Lawyer's name, if you have one

▶ _____
Lawyer's signature

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

To the Party Filing This Response:

Have someone age 18 or older—**not you**—mail a copy of this completed form EA-620 to the other party or to the other party's lawyer, if any. This is called "service by mail." The person who serves the form by mail must fill out form EA-250, *Proof of Service by Mail*. Have the person who did the mailing sign the original. Take the signed original Proof of Service form back to the court clerk or bring it with you to the hearing.

Order on Request to
 Modify **Terminate Elder or**
Dependent Adult Abuse Restraining Order

Clerk stamps date here when form is filed.

DRAFT
Not approved by the
Judicial Council
02.07.2017

Prevailing party completes items ① and ②.

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

① Party Seeking Modification/Termination

a. Full Name: _____

Lawyer (if any for this case):

Name: _____ State Bar No.: _____

Firm Name: _____

b. Address (If this party has a lawyer, give the lawyer's information.
If the party does not have a lawyer and wants to keep home
address private, give a different mailing address instead.
Telephone, fax, or e-mail are not required.

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

② Other Party

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

③ Hearing

There was a hearing on (date): _____ at time: _____ a.m. p.m. Dept.: _____ Room: _____

(Name of judicial officer): _____ made the orders at the hearing.

These people were at the hearing:

a. The party seeking modification termination

b. The party opposing modification termination

c. The lawyer for the party seeking modification termination (name): _____

d. The lawyer for the party opposing modification termination (name): _____

④ Order

The request to modify terminate the attached

Elder or Dependent Adult Abuse Restraining Order After Hearing (form EA-130)

Order Renewing Elder or Dependent Adult Abuse Restraining Order (form EA-730)

originally issued on (date): _____ is:

a. **DENIED.** The order and expiration date remain the same.

This is a Court Order.



b. **DENIED** without prejudice because the other party was not served on time.

c. **GRANTED.**

(1) The order is **TERMINATED** as of the date this Order is signed on page 3.

(2) The order is **MODIFIED** as stated: Below On Attachment 4c(2)

(Specify, referring to item numbers in the original order):

(3) The order now **EXPIRES** on (date): _____ at (time): _____

5 **Lawyer's Fees and Costs**

The person in ___ must pay to the person in ___ the following amounts for:

a. Lawyer's fees b. Costs

<u>Item</u>	<u>Amount</u>	<u>Item</u>	<u>Amount</u>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Additional items and amounts are attached at the end of this Order on Attachment 5.

6 **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 prevailing party or his or her lawyer should deliver a copy of the Order and its proof-of-service form to the law enforcement agency listed below to enter into CARPOS:

Name of Law Enforcement Agency	Address (City, State, Zip)
_____	_____
_____	_____

Additional law enforcement agencies are listed at the end of this Order on Attachment 6.

This is a Court Order.



To the Prevailing Party:

7 Service of Order

If service is required, someone age 18 or older—**not you**—must serve a copy of this order on the other party. If a party is represented by a lawyer, you must serve the lawyer instead of the party.

- The other party attended the hearing. **No further service is required.**
- Order Granted**—The other party did not attend the hearing. **Service is required:** This Order:
 - must be personally served on the other party within _____ days of the date of this Order.
 - may be served by mail on the other party within 5 days of the date of this Order.
- Order Denied**—The other party did not attend the hearing. **Service by Mail:** The other party may be served with this Order by mail.

Date: _____

Judicial Officer

(Clerk will fill out this part.)

—Clerk's Certificate—

Clerk's Certificate
[seal]

I certify that this *Order on Request to Terminate Elder or Dependent Adult Abuse 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.

**Request to Modify Terminate
Private Postsecondary School
Violence Restraining Order**

Clerk stamps date here when form is filed.

**DRAFT
Not approved by the
Judicial Council
02.01.2017**

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

1 Party Seeking Modification/Termination

- a. Full Name: _____
- b. Petitioner Respondent
- c. Your Lawyer (if you have one for this case):
 Name: _____ State Bar No.: _____
 Firm Name: _____
- d. 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 Other Party

- a. Full Name: _____
- b. Address (if known): _____
 City: _____ State: _____ Zip: _____

3 Current Order

- a. The current order is a/an:
 Private Postsecondary School Violence Restraining Order After Hearing (form SV-130)
 Order Renewing Private Postsecondary School Violence Restraining Order (form SV-730)
- b. The current order expires on (date): _____
- c. A copy of the current order is attached.

4 Request to Modify Restraining Order

- a. I ask the court to modify the current order as follows (specify requested changes referring to the item number in order that you want to change or delete):
 Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 4a —Requested Changes" for a title. You may use form MC-025, Attachment.



Notice to the Respondent:

If you are requesting modification or termination of the restraining order, you must have the protected person personally served with this Request and file a proof of service with the court before the hearing. You may use form SV-200, *Proof of Personal Service*.

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

Notice of Hearing on Request to
 Modify **Terminate Private**
Postsecondary School Violence
Restraining Order

Clerk stamps date here when form is filed.

DRAFT
Not Approved by Judicial
Council

Party seeking order completes items ① and ②.

① Party Seeking Modification/Termination

- a. Full Name: _____
- b. Your Lawyer (if you have one for this case):
Name: _____ State Bar No.: _____
Firm Name: _____
- c. 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: _____

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

② Other Party

- a. Full Name: _____
- b. Address (if known): _____
City: _____ State: _____ Zip: _____

③ Court Hearing

The judge has set a court hearing date. *Court will fill in box below.*

The current restraining order stays in effect unless terminated by the court.

Hearing Date →

Date: _____ Time: _____ Name and address of court if different from above:
Dept.: _____ Room: _____

To the Party Seeking Order:

④ Service

Someone age 18 or older—**not you**—must serve a copy of the following forms on the other party:

- SV-600, *Request to Modify/Terminate Private Postsecondary School Violence Restraining Order*;
- SV-610, *Notice of Hearing on Request to Modify/Terminate Private Postsecondary School Violence Restraining Order* (this form);
- SV-620, *Response to Request to Modify/Terminate Private Postsecondary School Violence Restraining Order* (blank copy).



- The forms must be personally served on the other party _____ days before the hearing.
- The forms may be served by mail on the other party or the other party's attorney _____ days before the hearing.

The person who serves the forms must fill out either form SV-200, *Proof of Personal Service*, or form SV-250, *Proof of Service by Mail*. Have the person who served sign the original. Take the signed original proof-of-service form back to the court clerk for filing or bring it with you to the hearing. For help with personal service, see form SV-200-INFO, *What is "Proof of Personal Service"?*

Date: _____

Clerk, by _____, Deputy

To the Other Party:

If you wish to make a written response to this request to modify or terminate the current private postsecondary school violence restraining order, you may fill out form SV-620, *Response to Request to Modify/Terminate Private Postsecondary School Violence 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 other party at the address in ① at least _____ days before the hearing. Also file form SV-250, *Proof of Service by Mail*, with the court before the hearing.

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 will fill out this part.)

—Clerk's Certificate—

I certify that this *Notice of Hearing on Request to Modify/Terminate Private Postsecondary School Violence Restraining Order* is a true and correct copy of the original on file in the court.

Clerk's Certificate
[seal]

Date: _____

Clerk, by _____, Deputy

SV-620

Response to Request to
 Modify **Terminate Private**
Postsecondary School Violence
Restraining Order

Clerk stamps date here when form is filed.

DRAFT
Not approved by the
Judicial Council
02.07.2017

Use this form to respond to the *Request to Modify or Terminate Private Postsecondary School Violence Restraining Order* (form SV-600).

- Fill out this form and then take it to the court clerk.
- Have someone age 18 or older—**not you**—mail a copy of this form and any attached pages to the other party at the address in (2) below. Use form SV-250, *Proof of Service by Mail*.

Fill in court name and street address:

Superior Court of California, County of

1 Party Filing Response

a. Your Full Name: _____

b. Petitioner Respondent

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

Name: _____ State Bar No.: _____

Firm Name: _____

c. 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. Law enforcement officer, give agency information.*)

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Fill in case number:

Case Number:

The court will consider your response at the hearing. Write your hearing date, time, and place from form SV-610 item (3) here.

Hearing Date → Date: _____
Time: _____

Dept.: _____ Room: _____

2 Other Party

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

3 Response

a. I agree to the Modification Termination of the order.

b. I do not agree to the Modification Termination
(*Specify why you disagree in Item (4) on page 2.*)

c. I agree to the following orders (*specify below or in item (4) on page 2*):



Order on Request to
 Modify **Terminate** **Private**
Postsecondary School Violence
Restraining Order

Clerk stamps date here when form is filed.

DRAFT
Not approved by the
Judicial Council
02.07.2017

Prevailing party completes items ① and ②.

① Party Seeking Modification/Termination

a. Full Name: _____

Lawyer (if any for this case):

Name: _____ State Bar No.: _____

Firm Name: _____

b. Address *(If this party has a lawyer, give the lawyer's information. If the party does not have a lawyer and wants to keep home address private, give a different mailing address instead. Telephone, fax, or e-mail are not required.)*

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

② Other Party

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

③ Hearing

There was a hearing on *(date)*: _____ at time: _____ a.m. p.m. Dept.: _____ Room: _____

(Name of judicial officer): _____ made the orders at the hearing.

These people were at the hearing:

a. The party seeking modification termination

b. The party opposing modification termination

c. The lawyer for the party seeking modification termination *(name)*: _____

d. The lawyer for the party opposing modification termination *(name)*: _____

④ Order

The request to modify terminate the attached

Private Postsecondary School Violence Restraining Order After Hearing (form SV-130)

Order Renewing Private Postsecondary School Violence Restraining Order (form SV-730)

originally issued on *(date)*: _____ is:

a. **DENIED.** The order and expiration date remain the same.

This is a Court Order.



b. **DENIED** without prejudice because the other party was not served on time.

c. **GRANTED.**

(1) The order is **TERMINATED** as of the date this Order is signed on page 3.

(2) The order is **MODIFIED** as stated: Below On Attachment 4c(2)

(Specify, referring to item numbers in the original order):

(3) The order now **EXPIRES** on *(date)*: _____ at *(time)*: _____

5 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 prevailing party or his or her lawyer should deliver a copy of the Order and its proof-of-service form to the law enforcement agency listed below to enter into CARPOS:

Name of Law Enforcement Agency

Address *(City, State, Zip)*

Additional law enforcement agencies are listed at the end of this Order on Attachment 5.

This is a Court Order.



To the Prevailing Party:

6 Service of Order

If service is required, someone age 18 or older—**not you**—must serve a copy of this order on the other party. If a party is represented by a lawyer, you must serve the lawyer instead of the party.

- The other party attended the hearing. **No further service is required.**
- Order Granted**—The other party did not attend the hearing. **Service is required:** This Order
 - must be personally served on the other party within _____ days of the date of this Order.
 - may be served by mail on the other party within 5 days of the date of this Order.
- Order Denied**—The other party did not attend the hearing. **Service by Mail:** The other party may be served with this Order by mail.

Date: _____

Judicial Officer

(Clerk will fill out this part.)

—Clerk's Certificate—

Clerk's Certificate
[seal]

I certify that this *Order on Request to Terminate Private Postsecondary School Violence 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.

**Request to Modify Terminate
Workplace Violence Restraining
Order**

Clerk stamps date here when form is filed.

**DRAFT
Not approved by the
Judicial Council
02.07.2017**

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

1 Party Seeking Modification/Termination

- a. Full Name: _____
- b. Petitioner Respondent
- c. Your Lawyer (if you have one for this case):
 Name: _____ State Bar No.: _____
 Firm Name: _____
- d. 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 Other Party

- a. Full Name: _____
- b. Address (if known): _____
 City: _____ State: _____ Zip: _____

3 Current Order

- a. The current order is a/an:
 Workplace Violence Restraining Order After Hearing (form WV-130)
 Order Renewing Workplace Violence Restraining Order (form WV-730)
- b. The current order expires on (date): _____
- c. A copy of the current order is attached.

4 Request to Modify Restraining Order

- a. I ask the court to modify the current order as follows (specify requested changes referring to the item number in order that you want to change or delete):
 Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 4a —Requested Changes" for a title. You may use form MC-025, Attachment.



Notice to the Respondent:

If you are requesting modification or termination of the restraining order, you must have the protected person personally served with this Request and file a proof of service with the court before the hearing. You may use form WV-200, *Proof of Personal Service*.

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

Notice of Hearing on Request to
 Modify **Terminate**
Workplace Violence Restraining Order

Clerk stamps date here when form is filed.

DRAFT
Not Approved by Judicial
Council

Party seeking order completes items ① and ②.

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

① **Party Seeking Modification/Termination**

- a. Full Name: _____
- b. Your Lawyer (if you have one for this case):
Name: _____ State Bar No.: _____
Firm Name: _____
- c. 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 **Other Party**

- a. Full Name: _____
- b. Address (if known): _____
City: _____ State: _____ Zip: _____

③ **Court Hearing**

The judge has set a court hearing date. Court will fill in box below.

The current restraining order stays in effect unless terminated by the court.

Name and address of court if different from above:

Hearing
Date →

Date: _____ Time: _____
Dept.: _____ Room: _____

To the Party Seeking Order:

④ **Service**

Someone age 18 or older—**not you**—must serve a copy of the following forms on the other party:

- WV-600, Request to Modify/Terminate Workplace Violence Restraining Order;
- WV-610, Notice of Hearing on Request to Modify/Terminate Workplace Violence Restraining Order (this form);
- WV-620, Response to Request to Modify/Terminate Workplace Violence Restraining Order (blank copy).



- The forms must be personally served on the other party _____ days before the hearing.
- The forms may be served by mail on the other party or the other party's attorney _____ days before the hearing.

The person who serves the forms must fill out either form WV-200, *Proof of Personal Service*, or form WV-250, *Proof of Service by Mail*. Have the person who served sign the original. Take the signed original proof-of-service form back to the court clerk for filing or bring it with you to the hearing. For help with personal service, see form WV-200-INFO, *What is "Proof of Personal Service"?*

Date: _____ Clerk, by _____, Deputy

To the Other Party:

If you wish to make a written response to this request to modify or terminate the current workplace violence restraining order, you may fill out form WV-620, *Response to Request to Modify/Terminate Workplace Violence 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 other party at the address in ① at least _____ days before the hearing. Also file form WV-250, *Proof of Service by Mail*, with the court before the hearing.

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 will fill out this part.)

—Clerk's Certificate—

I certify that this *Notice of Hearing on Request to Modify/Terminate Workplace Violence Restraining Order* is a true and correct copy of the original on file in the court.

Clerk's Certificate Date: _____
 [seal] Clerk, by _____, Deputy

Response to Request to

Modify **Terminate** **Private**
Workplace Violence Restraining Order

Clerk stamps date here when form is filed.

DRAFT
Not Approved by the
Judicial Council

Use this form to respond to the *Request to Modify or Terminate Private Postsecondary School Violence Restraining Order (form SV-600)*.

- Fill out this form and then take it to the court clerk.
- Have someone age 18 or older—**not you**—mail a copy of this form and any attached pages to the other party at the address in (2) below. Use form SV-250, *Proof of Service by Mail*.

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

The court will consider your response at the hearing. Write your hearing date, time, and place from form SV-610 item (3) here.

Hearing Date → Date: _____
Time: _____

Dept.: _____ Room: _____

1 Party Filing Response

a. Your Full Name: _____

b. Petitioner Respondent

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

Name: _____ State Bar No.: _____

Firm Name: _____

c. 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. Law enforcement officer, give agency information.)

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

2 Other Party

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

3 Response

a. I agree to the Modification Termination of the order.

b. I do not agree to the Modification Termination
(Specify why you disagree in Item (4) on page 2.)

c. I agree to the following orders (specify below or in item (4) on page 2):



Order on Request to
 Modify **Terminate** **Workplace**
Violence Restraining Order

Clerk stamps date here when form is filed.

DRAFT
Not Approved by the
Judicial Council

Prevailing party completes items ① and ②.

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

① Party Seeking Modification/Termination

a. Full Name: _____

Lawyer (if any for this case):

Name: _____ State Bar No.: _____

Firm Name: _____

b. Address (If this party has a lawyer, give the lawyer's information.
If the party does not have a lawyer and wants to keep home
address private, give a different mailing address instead.
Telephone, fax, or e-mail are not required.

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

② Other Party

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

③ Hearing

There was a hearing on (date): _____ at time: _____ a.m. p.m. Dept.: _____ Room: _____

(Name of judicial officer): _____ made the orders at the hearing.

These people were at the hearing:

a. The party seeking modification termination

b. The party opposing modification termination

c. The lawyer for the party seeking modification termination (name): _____

d. The lawyer for the party opposing modification termination (name): _____

④ Order

The request to modify terminate the attached

Workplace Violence Restraining Order After Hearing (form WV-130)

Order Renewing Workplace Violence Restraining Order (form WV-730)

originally issued on (date): _____ is:

a. **DENIED.** The order and expiration date remain the same.

This is a Court Order.



b. **DENIED** without prejudice because the other party was not served on time.

c. **GRANTED.**

(1) The order is **TERMINATED** as of the date this Order is signed on page 3.

(2) The order is **MODIFIED** as stated: Below On Attachment 4c(2)

(Specify, referring to item numbers in the original order):

(3) The order now **EXPIRES** on *(date)*: _____ at *(time)*: _____

5 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 prevailing party or his or her lawyer should deliver a copy of the Order and its proof-of-service form to the law enforcement agency listed below to enter into CARPOS:

Name of Law Enforcement Agency

Address *(City, State, Zip)*

Additional law enforcement agencies are listed at the end of this Order on Attachment 5.

This is a Court Order.



To the Prevailing Party:

6 Service of Order

If service is required, someone age 18 or older—**not you**—must serve a copy of this order on the other party. If a party is represented by a lawyer, you must serve the lawyer instead of the party.

- The other party attended the hearing. **No further service is required.**
- Order Granted**—The other party did not attend the hearing. **Service is required:** This Order:
 - must be personally served on the other party within _____ days of the date of this Order.
 - may be served by mail on the other party within 5 days of the date of this Order.
- Order Denied**—The other party did not attend the hearing. **Service by Mail:** The other party may be served with this Order by mail.

Date: _____

Judicial Officer

(Clerk will fill out this part.)

—Clerk's Certificate—

Clerk's Certificate
[seal]

I certify that this *Order on Request to Terminate Workplace Violence 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.