

PARTY WITHOUT ATTORNEY OR ATTORNEY STATE BAR NUMBER: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARENT/PARTY:	
<b>DECLARATION REGARDING NOTICE AND SERVICE OF REQUEST FOR TEMPORARY EMERGENCY (EX PARTE) ORDERS</b>	CASE NUMBER:

**NOTICE:** Do not use this form to ask for domestic violence restraining orders. Before completing this form, read your court's local procedures for requesting temporary emergency orders and obtaining the information needed to complete item 2 of this form. Courts may grant temporary emergency orders with or without an emergency hearing. Find local rules at [courts.ca.gov/3027.htm](http://courts.ca.gov/3027.htm).

1. I am (specify)  attorney for  petitioner  respondent  other parent/party  
 not a party in the case (name and title/relationship to party):
2. I  did  did not give notice (select all that apply)  
 that there will be an emergency court hearing  that papers will be submitted to the court on the request  
 for temporary emergency (ex parte) orders  
 to reschedule a hearing  to reschedule a hearing involving temporary emergency (ex parte) orders  
 on the date, time, and location indicated below:

Date:	Time:	<input checked="" type="checkbox"/> Dept.:	<input checked="" type="checkbox"/> Room:
Address of court: <input checked="" type="checkbox"/> same as noted above		<input checked="" type="checkbox"/> other (specify):	

3. **NOTICE** (If you gave notice, complete item 3a. If you did not give notice complete item 3b or 3c.)
  - a.  I gave notice as described in items (1) through (5) below:
    - (1) I gave notice to (select all that apply)
 

<input checked="" type="checkbox"/> petitioner.	<input checked="" type="checkbox"/> petitioner's attorney.
<input checked="" type="checkbox"/> respondent.	<input checked="" type="checkbox"/> respondent's attorney.
<input checked="" type="checkbox"/> other parent/party.	<input checked="" type="checkbox"/> other parent's/party's attorney.
<input checked="" type="checkbox"/> child's attorney.	<input checked="" type="checkbox"/> other (specify):
    - (2) I gave notice on (date): \_\_\_\_\_ at: \_\_\_\_\_  a.m.  p.m. \_\_\_\_\_, California.
 

<input checked="" type="checkbox"/> personally	at (location): _____
<input checked="" type="checkbox"/> by telephone	using telephone no.: _____
<input checked="" type="checkbox"/> by fax	using fax no.: _____
<input checked="" type="checkbox"/> by voicemail	using voicemail no.: _____
<input checked="" type="checkbox"/> by electronic means (if permitted) (specify electronic service address of person): _____	
<input checked="" type="checkbox"/> by overnight mail or other overnight carrier (specify address of delivery): _____	
    - (3) I gave notice (select one)
 

<input checked="" type="checkbox"/> by 10 a.m. the court day before this emergency hearing.
<input checked="" type="checkbox"/> after 10 a.m. the court day before this emergency hearing because of the following exceptional circumstances (specify): _____

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(4) I notified the person in 3a(1) that the following temporary emergency orders are being requested (specify):

(5) The person in 3a(1) responded as follows:  Attachment 3a(5)

(6) I  do  do not believe that the person in 3a(1) will oppose the request for temporary emergency orders.

- b.  **Request for waiver of notice.** Due to exceptional circumstances, I did not give notice about the request for temporary emergency orders. I ask that the court waive notice to the other party to help prevent (specify)
- (1)  immediate danger or irreparable harm to myself (or my client) or to the children in the case.
  - (2)  an immediate risk that the children in the case will be removed from the state of California.
  - (3)  immediate loss or damage to property subject to disposition in the case.
  - (4)  other exceptional circumstances (specify):

Facts showing exceptional circumstances in support of the request to waive notice include (specify):  Attachment 3b.

c.  **Unable to provide notice.** I did not give notice about the request for temporary emergency orders. I used my best efforts to tell the opposing party when and where this hearing would take place but was unable to do so. The efforts I made to inform the other person were (specify below):  Attachment 3c.

4.  **SERVICE OF DOCUMENTS**

a. The following documents were served on

- petitioner     petitioner's attorney     other parent/party     other parent/party's attorney  
 respondent     respondent's attorney     child's attorney     other (specify):

before the request was filed with the court:

- (1)  A copy of *Request for Order* (form FL-300) for temporary emergency orders, and *Temporary Emergency (Ex Parte) Orders* (form FL-305).
- (2)  A copy of a request to reschedule hearing and *Order on Request to Reschedule Hearing* (form FL-309). Form FL-306 may be used for the request.
- (3)  A copy of a request to reschedule hearing involving temporary emergency (ex parte) orders and *Order on Request to Reschedule Hearing* (form FL-309). Form FL-307 may be used for the request.
- (4)  Other documents (specify):

b. **Documents were served on** (date): \_\_\_\_\_ at: \_\_\_\_\_  a.m.  p.m., California.  
 personally at (location): \_\_\_\_\_  
 by fax on \_\_\_\_\_ using fax no.: \_\_\_\_\_  
 by electronic means (if permitted) (specify electronic service address of person served): \_\_\_\_\_  
 by overnight mail or other overnight carrier (specify address of delivery): \_\_\_\_\_

c. Documents were not served on the opposing party due to the exceptional circumstances specified in  3b, above.  3c, above.  Attachment 4c.

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

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

\_\_\_\_\_ (TYPE OR PRINT NAME) \_\_\_\_\_ (SIGNATURE)