



Motion to Modify/Terminate CHRO Step 1 Packet

Civil Self-Help Services

To ask the Court to Modify or Terminate
an existing permanent Restraining Order.

The following forms are required for a Motion to Modify or Terminate CHRO and are included in this packet.

CH-600 Request to Modify/Terminate CHRO

CH-610 Notice of Hearing on Request to Modify/Terminate CHRO

CH-630 Order on Request to Modify/Terminate CHRO

There is no Law Help Interactive Interview to help you fill out these forms. You can find fillable PDF forms at courts.ca.gov/forms.htm

If you want to ask the Court to waive the \$60 filing fee, you need:

FW-001 – Request for Fee Waiver

FW-003 – Order on Fee Waiver

You may need forms that are *not* included in this packet. If you...

NEED MORE ROOM FOR AN ANSWER: You may either use a blank sheet of 8.5 X 11 paper, or Attachment (**MC-025**).

NEED AN INTERPRETER: Ask the clerk, or Self-Help Staff to request an interpreter to be present for your hearing.

WANT TO PROVIDE SCREENSHOTS OR OTHER EVIDENCE: This process is not an opportunity to “re-litigate” the case. However, if you have new evidence that supports why the permanent Restraining Order should be modified or terminated, you may attach that to **CH-600**.

FILING FEE: The filing fee to ask the Court to modify (change) or terminate (end) an existing permanent CHRO is **\$60**. You can also ask for a Fee Waiver with forms FW-001 & FW-003 (not included).

COPIES: The original plus one (1) copy of all documents are required at the time of filing (2 total). The court cannot make copies for you at the filing window. A public copy machine is available in Room 102 at 720 9th Street. Copies cost 0.25 cents per page. The machine takes cash only.

WHERE TO FILE:

IN PERSON	BY MAIL
<p>Civil Filing Counter 720 9th Street, Rm. 102, Window 10 Sacramento, CA 95814</p> <p>Monday – Friday 8:30 am – 4:00 pm</p>	<p>Sacramento Superior Court 720 9th Street, Rm. 102, Sacramento, CA 95814</p>

If you file your forms before 11:30 AM, you can see what the Court decided on the same day at 4:00 PM. Forms filed after 11:30 AM are ready the next business day at 4:00 PM.

If you need help filling out these forms,
contact Civil Self-Help Services.

✉ civilselfhelp@saccourt.ca.gov ☎ 916-874-1421

MON	TUE	WED	THU	FRI
8:30 AM- Noon	8:30 AM- Noon	8:30 AM- Noon	8:30 AM- Noon	8:30 AM- Noon
1:30 PM- 4:00 PM	1:30 PM- 4:00 PM	1:30 PM- 4:00 PM	CLOSED PM	1:30 PM- 4:00 PM

Clerk stamps date here when form is filed.

1 Party Seeking Modification/Termination

- a. Your 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: _____

Fill in court name and street address:

Superior Court of California, County of Sacramento

720 9th Street
Sacramento, CA 95814

Fill in case number:

Case Number:

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.

Date: _____

Lawyer's name (if any)

▶ _____
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

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

Clerk stamps date here when form is filed.

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
Sacramento

720 9th Street
Sacramento, CA 95814

Fill in case number:

Case Number:

② Other Party

Full 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.



Case Number: _____

- 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 Modify/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.

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

Clerk stamps date here when form is filed.

Party seeking order completes items ① and ②.

① Party Seeking Modification/Termination

- a. Your 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 Sacramento
720 9th Street
Sacramento, CA 95814

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.

Name and address of court if different from above:

Hearing Date →

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

④ Service on Other Party

- a. 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 served on the other party _____ days before the hearing.



- b. **If you are the restrained person:** You must have the protected person personally served with these forms. This requirement of personal service on the protected person is not a justification for you to violate the terms of the civil harassment restraining order.
- c. **If you are the protected person:** The restrained person may be served with these forms by mail.
- d. The person who serves the forms must fill out either form CH-200, *Proof of Personal Service*, or form CH-250, *Proof of Service of Response 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 of Response 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
[seal]

Date: _____

Clerk, by _____, Deputy