

PETITIONER:  RESPONDENT:	CASE NUMBER:
--------------------------------	--------------

**APPLICATION FOR ORDER AND SUPPORTING DECLARATION**

—THIS IS NOT AN ORDER—

Petitioner     Respondent     Claimant    requests the following orders:

1.  CHILD CUSTODY     To be ordered pending the hearing
- |                             |  |  |
|-----------------------------|--|--|
| a. <u>Child</u> (name, age) | b. <u>Legal custody</u> to<br>(person who makes decisions<br>about health, education, etc.) (name) | c. <u>Physical custody</u> to<br>(person with whom child lives.)<br>(name) |
|-----------------------------|--|--|

Modify existing order  
 (1) filed on (date):  
 (2) ordering (specify):

As requested in form     FL-311     FL-312     FL-341(C)     FL-341(D)     FL-341(E)

2.  CHILD VISITATION     To be ordered pending the hearing
- a. As requested in: (1)  Attachment 2a (2)  Form FL-311 (3)  Other (specify):
- b.  Modify existing order  
 (1) filed on (date):  
 (2) ordering (specify):
- c.  One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one.) The orders are from the following court or courts (specify county and state):

(1) <input type="checkbox"/> Criminal: County/state: _____ Case No. (if known): _____	(3) <input type="checkbox"/> Juvenile: County/state: _____ Case No. (if known): _____
(2) <input type="checkbox"/> Family: County/state: _____ Case No. (if known): _____	(4) <input type="checkbox"/> Other: County/state: _____ Case No. (if known): _____

3.  CHILD SUPPORT (An earnings assignment order may be issued.)
- a. Child (name, age)    b. Monthly amount (if not by guideline)
- \$

c.  Modify existing order  
 (1) filed on (date):  
 (2) ordering (specify):

4.  SPOUSAL OR PARTNER SUPPORT (An earnings assignment order may be issued.)
- |   |  |
|---|--|
| a. <input type="checkbox"/> Amount requested (monthly): \$<br>b. <input type="checkbox"/> Terminate existing order<br>(1) filed on (date):<br>(2) ordering (specify): | c. <input type="checkbox"/> Modify existing order<br>(1) filed on (date):<br>(2) ordering (specify): |
|---|--|

5.  ATTORNEY FEES AND COSTS    a.  Fees: \$    b.  Costs: \$

**NOTE: To obtain domestic violence restraining orders, you must use the forms *Request for Order (Domestic Violence Prevention)* (form DV-100) and *Temporary Restraining Order and Notice of Hearing (Domestic Violence Prevention)* (form DV-110).**

PETITIONER:	CASE NUMBER:
RESPONDENT:	

6.  PROPERTY RESTRAINT       **To be ordered pending the hearing**
- a. The  petitioner  respondent  claimant is restrained from transferring, encumbering, hypothecating, concealing, or in any way disposing of any property, real or personal, whether community, quasi-community, or separate, except in the usual course of business or for the necessities of life.
- The applicant will be notified at least five business days before any proposed extraordinary expenditures, and an accounting of such will be made to the court.
- b.  Both parties are restrained and enjoined from cashing, borrowing against, canceling, transferring, disposing of, or changing the beneficiaries of any insurance or other coverage, including life, health, automobile, and disability, held for the benefit of the parties or their minor children.
- c.  Neither party may incur any debts or liabilities for which the other may be held responsible, other than in the ordinary course of business or for the necessities of life.
7.  PROPERTY CONTROL       **To be ordered pending the hearing**
- a.  The petitioner  respondent is given the exclusive temporary use, possession, and control of the following property that we own or are buying (*specify*):
- b.  The petitioner  respondent is ordered to make the following payments on liens and encumbrances coming due while the order is in effect:
- | <u>Debt</u> | <u>Amount of payment</u> | <u>Pay to</u> |
|-------------|--------------------------|---------------|
|             |                          |               |
8.  **I request** that time for service of the *Order to Show Cause* and accompanying papers be shortened so that these documents may be served no less than (*specify number*): \_\_\_\_\_ days before the time set for the hearing. I need to have the order shortening time because of the facts specified in the attached declaration.
9.  OTHER RELIEF (*specify*):
10.  FACTS IN SUPPORT of relief requested and change of circumstances for any modification are (*specify*):  
 contained in the attached declaration.

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 OF APPLICANT)