

ATTORNEY OR PARTY WITHOUT 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:	
In re _____ on Habeas Corpus (NAME OF PETITIONER)	
<b>PETITIONER'S NOTICE OF APPEAL</b> <b>Death Penalty–Related Habeas Corpus Decision</b> <b>(Pen. Code, § 1509.1; Cal. Rules of Court, rule 8.392)</b>	
CASE NUMBER:	

**NOTICE**

- **You must file this form in the SUPERIOR COURT WITHIN 30 DAYS** after the court rendered the judgment or made the order you are appealing.
- **IMPORTANT:** If you are appealing the decision of a superior court denying relief on a successive habeas corpus petition related to a sentence of death, and the superior court did not grant you a certificate of appealability, you must complete the Request for Certificate of Appealability on page 2 of this form.

1. Petitioner appeals from a judgment rendered or an order made by the superior court in a death penalty–related habeas corpus proceeding.

NAME of petitioner:

DATE of the order or judgment:

2.  This is an appeal from the decision of a superior court denying relief on a successive habeas corpus petition related to a sentence of death. *(If you check this box, you must check a or b.)*

a.  The superior court granted a certificate of appealability.

b.  The superior court did not grant a certificate of appealability. *(You must complete the Request for Certificate of Appealability on page 2 of this form.)*

3.  Petitioner requests that the court appoint an attorney for this appeal. Petitioner  was  was not represented by an appointed attorney in the superior court.

4. Petitioner's mailing address is:  same as in attorney box above.  
 as follows:

Date:

\_\_\_\_\_



(TYPE OR PRINT NAME)

\_\_\_\_\_

(SIGNATURE OF PETITIONER OR ATTORNEY)

In re _____ on Habeas Corpus <div style="text-align: center;">(NAME OF PETITIONER)</div>	CASE NUMBER:
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**REQUEST FOR CERTIFICATE OF APPEALABILITY**

Penal Code section 1509.1(c) provides that a certificate of appealability may be issued only if the petitioner has shown both “a substantial claim for relief” and “a substantial claim that the requirements of subdivision (d) of section 1509 have been met.”

Penal Code section 1509(d) provides, in full:

An initial petition which is untimely under subdivision (c) or a successive petition whenever filed shall be dismissed unless the court finds, by the preponderance of all available evidence, whether or not admissible at trial, that the defendant is actually innocent of the crime of which he or she was convicted or is ineligible for the sentence. A stay of execution shall not be granted for the purpose of considering a successive or untimely petition unless the court finds that the petitioner has a substantial claim of actual innocence or ineligibility. “Ineligible for the sentence of death” means that circumstances exist placing that sentence outside the range of the sentencer’s discretion. Claims of ineligibility include a claim that none of the special circumstances in subdivision (a) of Section 190.2 is true, a claim that the defendant was under the age of 18 at the time of the crime, or a claim that the defendant has an intellectual disability, as defined in Section 1376. A claim relating to the sentencing decision under Section 190.3 is not a claim of actual innocence or ineligibility for the purpose of this section.

1. I request that the Court of Appeal issue a certificate of appealability. My claims for relief are:  Set forth in Attachment 1.

2. My claim that the requirements of Penal Code section 1509(d) have been met is:  Set forth in Attachment 2.

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 PETITIONER OR ATTORNEY)