TELEPHONE NO.: FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: MAILING ADDRESS: DITY AND ZIP CODE: BRANCH NAME: PETITION OF (Name of each petitioner):	FOR COURT USE ONLY
E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: PETITION OF (Name of each petitioner):	
E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: PETITION OF (Name of each petitioner):	
E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: PETITION OF (Name of each petitioner):	
ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: PETITION OF (Name of each petitioner):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: PETITION OF (Name of each petitioner):	
STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: PETITION OF (Name of each petitioner):	
BRANCH NAME: PETITION OF (Name of each petitioner):	
BRANCH NAME: PETITION OF (Name of each petitioner):	
PETITION OF (Name of each petitioner):	
APPLICATION TO FILE DOCUMENTS UNDER SEAL IN NAME CHANGE PROCEEDING UNDER ADDRESS CONFIDENTIALITY PROGRAM (SAFE AT HOME)	ASE NUMBER:
` '	
Before you complete this petition, you should read the <i>Information Sheet for Address Confidentiality Program (Safe at Home) (</i> form NC-400-INFO). You mute <i>Application to File Documents Under Seal in Name Change Proceeding Unde (Safe at Home)</i> (form NC-420) with this application. You must file this application superior court of the county where the person whose name is to be changed	ust file a Declaration in Support of er Address Confidentiality Program tion and the petition in the
. Petitioner (name): Secretary of State's address confidentiality program under Government Code sections 6 following as a reason for the name change: (1) seeking to avoid domestic violence, (2) s filing on behalf of, a victim of sexual assault.	
Petitioner requests that the court file the following documents under seal:	
a. Petition for Change of Name (form NC-100)	
b. Attachment to Petition for Change of Name (form NC-110)	
c. Order to Show Cause for Change of Name (form NC-120)	
d. Decree Changing Name (form NC-130)	
e. Civil Case Cover Sheet (form CM-010)	
f. Application to File Documents Under Seal in Name Change Proceeding Under (Safe at Home) (form NC-410)	er Address Confidentiality Program
g. Declaration in Support of Application to File Documents Under Seal in Name Confidentiality Program (Safe at Home) (form NC-420)	Change Proceeding Under Address
h. Order on Application to File Documents Under Seal in Name Change Procee Program (Safe at Home) (form NC-425)	eding Under Address Confidentiality
i. Other (specify):	
 The facts that support this petition to file the documents checked above under seal are s <i>Application to File Documents Under Seal In Name Change Proceeding Under Address</i> (form NC-420). 	
 Petitioner has completed each of the documents checked above, placed them in a seale with the court along with this application. 	ed envelope, and is lodging the envelope
Date:	
k	
(TYPE OR PRINT NAME)	FATTORNEY OR PETITIONER WITHOUT ATTORNEY)