

Clerk stamps below when form is filed.

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

1 Name of Protected Person:

Your lawyer in this case (if you have one):

Name: _____ State Bar No.: _____

Firm Name: _____

Address (If you have a lawyer for this case, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, give a different mailing address instead. You do not have to give your telephone, fax, or e-mail.):

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-Mail Address: _____

2 Name of Restrained Person:

Describe that person:	Sex:	<input type="checkbox"/> M	<input type="checkbox"/> F	Ht.:	_____	Wt.:	_____
Race:	_____		Hair Color:	_____			
Eye Color:	_____	Age:	_____	Date of Birth:	_____		

3 I ask the court to renew the *Restraining Order After Hearing* (Form DV-130). A copy of the order is attached.

- a. The order ends on (date): _____
- b. The order has been renewed _____ times.
- c. I want the order to be renewed for (check one):
 5 years permanently

4 I ask the court to renew the order because: (Check all that apply. Explain why you are afraid of abuse in the future):

- a. The person in **2** has violated the order (explain what happened and when): _____

- b. I am afraid that the person in **2** will abuse me in the future because: _____

- c. Other (explain): _____

Check here if you need more space. Attach a sheet of paper and write "Form DV-700, Other" for a title.

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

This is not a Court Order.