(This document must be filed by noon on the day of the ex parte hearing)

NAME, ADDRESS & TELEPHONE NUMBER	FOR COURT USE ONLY
TELEPHONE NO: FAX NO:	
ATTORNEY FOR (NAME): SUPERIOR COURT OF CALIFORNIA	_
COUNTY OF YUBA	
215 5TH STREET, SUITE 200	
MARYSVILLE, CA 95901-5737 (530) 740-1800	
PLAINTIFF/PETITIONER:	
vs.	
DEFENDANT/RESPONDENT:	
	OAOE NUMBER
REQUEST FOR WAIVER OF NOTICE WITH DECLARATION IN SUPPORT THEREOF (NON-DOMESTIC VIOLENCE)	CASE NUMBER:
(Pursuant to Rules of Court 5.4, 5.151, 5.165 and 5.167)	
Language Motion in the Notion	
I request that notice NOT be given by me.	
In support of this request I provide the following statements:	
-	

SHORT TITLE:		CASE NUMBER:
I declare under penalty of perjury under the laws of the Stat	te of California that the forego	ing is true and correct.
Date:		
Printed Name	Signature of Declarant	
OF	RDER	
GOOD CAUSE APPEARING, THE COURT ORDERS (non-domestic violence) is hereby:	S that waiver of the notice	of the of the ex parte hearing
☐Granted ☐Denied		
Date:	JUDGE OF T	HE SUPERIOR COURT