

Protecting Yourself Against Eviction- Self-Help Answer Packet for Tenants

Is your landlord trying to evict you? Have you received court papers for an "unlawful detainer"?

It is important that you protect your rights. The first step to protecting yourself is to file an "Answer" in court after you get court papers for eviction. This packet will help you do that if you do not have or cannot get a lawyer.

Review the instructions in this packet and complete your forms carefully.

IMPORTANT DEADLINE: You only have 5 court days to file an Answer after you receive the court papers for eviction.

If you do not file an answer with the court before this deadline, your landlord can get a "default judgment" meaning you AUTOMATICALLY LOSE and the Sheriff can lock you out of your home.

Date you received the court papers:	
	+ 5 Court Days (does not include weekends or court holidays)
Your filing deadline =	

This online tool will help you determine your deadline: https://www.lacourt.org/courtdatecalculator/ui/

This self-help packet is provided for informational purposes only and it is not legal advice. Still try to file your answer if you think you missed the deadline. If you have missed your answer deadline or if your landlord has already gotten a judgment against you for eviction, please contact our Legal Advice Line at (800)-551-5554.

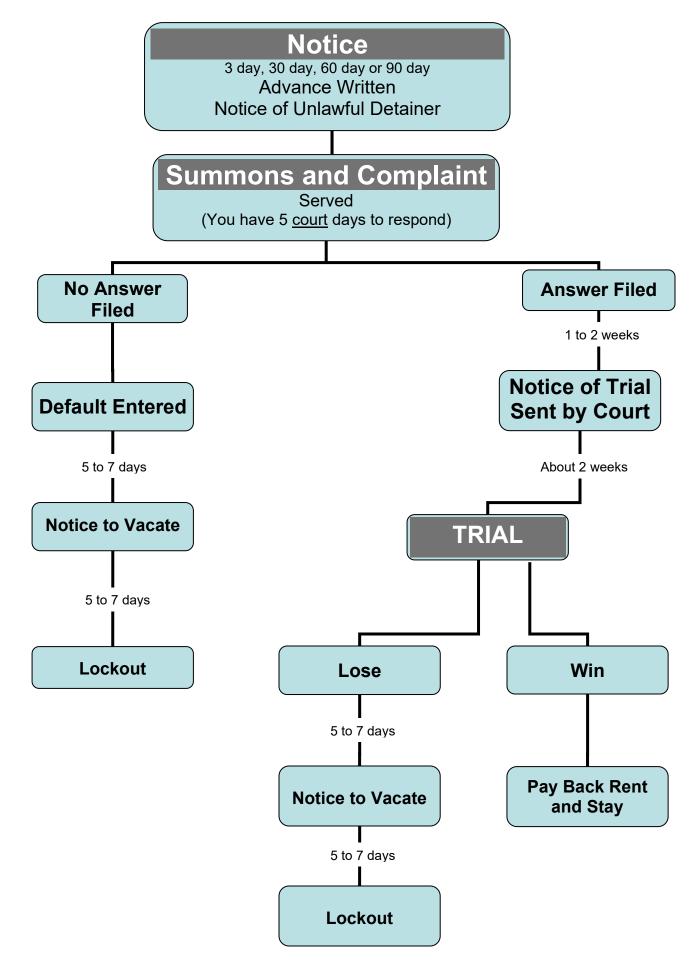
Version updated: September 22, 2020

This packet contains:

- Answer filing checklist
 - Use this to make sure you have completed all the steps to file your answer
- Flow chart
- Answer Guide
- Sample Summons and Complaint
- Sample Answer Form UD-105 with Instructions
- Sample Proof of Service with Instructions
- Sample Fee Waiver Forms with Instructions
- Blank Forms to be Filled out and filed with the court
 - Answer
 - Proof of Service
 - o Fee Waiver

Filing Checklist

IMPORTANT: you have ONLY <u>5 court days</u> after receiving the <i>Summons</i> & <i>Complaint</i> to						
file your Answer , Attachment , + Proof of Service at the court.						
 Do NOT count the day you were served, weekends or holidays. 						
	Filing Deadline is:					
(See cover she	eet of this packet for guidance on how to calculate your deadline).					
	Fill out the following forms in black or blue ink:					
□Step 1	☐ [UD-105] Answer-Unlawful Detainer					
	☐ MAKE SURE YOU SIGN YOUR NAME TWICE ON BOTTOM OF PAGE 3 (see					
Fill out forms	sample)					
i ili out ioiilis	[MC-025] Attachment(s)					
	☐ [POS-030]Proof of Service by First-Class Mail–Civil					
	Note: filling an Answer costs \$225 per person. If you can't afford this fee, fill out the following 2 forms as well:					
	☐ Request to Waive Fees [FW-001] + ☐ Order on Fee Waiver [FW-003]					
	Make 2 copies of:					
	□ [UD-105] Answer					
□Step 2	☐ [MC-025] Attachment(s)					
-	☐ [POS-030] Proof of Service by First-Class Mail–Civil					
	File the originals in court					
Make copies	 One copy of each will be for the landlord (or their attorney) Keep one copy for your records 					
	Make 1 copy of:					
	☐ [FW-001] Request to Waive Fees + ☐ [FW-003] Order on Fee Waiver					
	Hold on to the original to be filed in court.					
	Keep one copy for your records					
	Serve a copy of:					
□Step 3	□ [UD-105]Answer + □ [MC-025]Attachment(s) + □ [POS-030]Proof of Service by First-					
	Class Mail–Civil					
Serve the	By law, you cannot serve the papers yourself. You MUST have someone who is at least <u>18</u>					
Plaintiff/	years old AND does NOT live with you, mail a copy of your Answer + Attachment(s) +					
Landlord (or	copy of the proof of service to the plaintiff/landlord (or their attorney). You can ask a					
their Attorney)	friend, relative, etc. to do this for you, or you can hire a "process server" to do it.					
	 After mailing the papers, the server <u>must</u> sign and return the original Proof of Service to you to be filed in court. 					
	YOU MUST FINISH STEP 3 BEFORE YOU MAY PROCEED TO THIS STEP!					
□Step 4	Turn in the original & copies of the Answer, Attachment(s), + Proof of Service at the					
Filo originals	Clerk's Office at the Superior Court (see address on summons & complaint). If you need a fee waiver, you should file the 2 completed Fee Waiver forms FW-001and					
File originals	FW-003 at the same time.					
	The Court Clerk will keep the originals and return the copies to you.					
	Keep the copies in a safe place after they are "filed stamped" by the Court Clerk.					
	After you file these papers, the landlord may file a form called Request/Counter- Request to Set Case for Trial- Unlawful Detainer [UD-150]. The court will schedule your trial shortly					
□Step 5	after filing and mail you a letter with your <u>trial date</u> .					
•	MAKE SURE YOU CHECK YOUR MAIL AND ATTEND ALL COURT DATES					
What happens						
next						



Page 4 of 25 (excluding blank court forms at end of packet)

GUIDE ON FILLING OUT UD - 105 ANSWER FORM

- 1. Look at the sample UD-105 Answer Form in this packet for instructions on how to fill out your Answer Forms.
- 2. When filling out your Answer Forms, you will need to get information from the court papers ("Summons and Complaint") that you received . Look at the sample Summons and Complaint in this packet for help with how to read your Summons and Complaint.
 - a. <u>Important:</u> You MUST check a box in Paragraph 2 of your Answer. To figure out what amount of money your landlord is requesting, look at Page 4 of 4 of Complaint in Paragraph 19 where it says "PlaintiffRequests".
 - b. If your landlord is requesting less than \$1,000, check Box 2a. This means that you think that generally ALL your landlord's statements in the Complaint form are wrong or incorrect or false or not true.
 - c. If your landlord is requesting more than \$1,000, you will either: (1) need to list some information about which parts of your landlord's Complaint form are false under 2b(1) or in an attachment; or (2) if you do not know whether any of your landlord's statements in the Complaint form are true or false, list more information under 2b(2) or in an attachment.
 - d. NOTE: If you don't know whether a paragraph in your landlord's Complaint form is true or false, list that paragraph as false. It is important to tell the court that your landlord must prove that the statement is true before being able to evict you.
- 3. **You MUST sign and date the Verification!** The verification signature line at the very bottom of the Answer Form. You must sign this <u>in addition to</u> the "Signature of the Defendant" line above it on Page 3 of 3 of the Answer Form.

AFFIRMATIVE DEFENSES

Affirmative defenses are legally-accepted reasons why you should not be evicted.

REVIEW THE EXPLANATIONS BELOW AND CHECK ALL AFFIRMATIVE
DEFENSES THAT APPLY TO YOU ON THE ANSWER FORM. "Plaintiff" = your
landlord. "Defendant" = you/your household. | Important: | If you're not sure if
a defense applies to you, it's generally safer to check the box so the judge will consider it.
Your case will be stronger if you include affirmative defenses with your Answer.

AFFIRMATIVE DEFENSES from Paragraph 3 of the UD -105 Answer Form:

3.a. Plaintiff has breached the warranty to provide habitable premises.

<u>Check this box if</u>: you didn't pay all or part of your rent because there are maintenance problems with your home that you: 1) told your landlord about AND 2) your landlord has failed to repair. <u>Only check this box if your notice was for "nonpayment of rent."</u> Note: check this box if you have any conditions that need repairs in your home.

3.b. Defendant made needed repairs and properly deducted the cost from the rent, and plaintiff did not give proper credit.

<u>Check this box if:</u> there were maintenance problems and you made (or paid for) the repairs yourself after you told your landlord, gave your landlord time to fix the problems, and your landlord has refused to reimburse or give you a sufficient rent credit for the cost of the repairs. Only check this box if your notice was for "nonpayment of rent."

3.c. Before the notice to pay rent or quit expired, defendant offered the rent due but plaintiff would not accept it.

<u>Check this box if</u>: you tried to pay your landlord the full amount of rent you owned before the deadline on your notice, but your landlord would not accept it.

For example: you received a notice that says you have to pay your rent by September 5, 2020. On September 3, 2020, you handed your rent to your landlord but your landlord would not accept it or returned it to you.

3.d. Plaintiff waived, changed, or canceled the notice to quit.

<u>Check this box if</u>: your landlord did something to make you think they had changed their mind about making you move out.

For example: your landlord told you to ignore the notice, or accepted rent to cover the month after your eviction notice to quit says to move out.

3.e. Plaintiff served defendant with the notice to quit or filed the complaint to retaliate against defendant.

<u>Check this box if:</u> Your landlord is trying to evict you because you asserted your rights as a tenant by making a request or a complaint.

For example: you made a complaint against your landlord about a repair issue, instead of making the repairs your landlord is punishing you by trying to evict you.

3.f. By serving defendant with the notice to quit or filing the complaint, plaintiff is arbitrarily discriminating against defendant in violation of the Constitution or the laws of the United States or California.

<u>Check this box if:</u> your landlord is trying to evict you because your landlord does not want to rent to you anymore based on your/your household's protected trait(s), for example, race, ethnicity, gender, sex, sexual orientation/gender expression/identity, disability, familial status (having children), source of income, veteran status, immigration or citizenship status, or any other arbitrary trait.

For example: If you have a disability, and the symptoms of your disability contributed to why your landlord is trying to evict you.

3.g. Plaintiff's demand for possession violates the local rent control or eviction control ordinance

<u>Check this box if:</u> Your landlord did not follow the local eviction or rent increase laws. Look up if your city or county has any just cause requirements or rent control provisions that may apply to you.

For example: Your landlord is trying to evict you without listing a legal just cause in the termination notice and/or providing a copy of the notice to the city. The landlord has to carefully comply with an applicable local just cause ordinance in an eviction.

3.h. Plaintiff's demand for possession is subject to the Tenant Protection Act, Civil Code section 1946.2 or 1947.12, and is not in compliance with the Act

(1) Plaintiff failed to state a just cause for termination of tenancy in the written notice to terminate

<u>Check this box if:</u> your landlord gave you an eviction notice that does not list any reason why they are evicting you, or listed reason(s) that are not legal.

(2) Plaintiff failed to provide an opportunity to cure any alleged violations of terms and conditions of the lease (other than nonpayment) as required under Civ. Code § 1946.2(c)

<u>Check this box if:</u> your landlord gave you an eviction notice that said you violated your lease and that you can fix the problem, but did not give you an opportunity to fix the lease violation.

For example: your landlord issued a notice terminating your tenancy for loud music but did not give you an opportunity to fix that violation.

(3) Plaintiff failed to comply with the relocation assistance requirements of Civ. Code § 1946.2(d)

<u>Check this box if:</u> If you are not being evicted because of something your landlord says you did wrong ("no-fault" evictions such as Owner Move-in), your landlord may be required to give you a certain amount of money to help you move out in the form of at least one month's worth of rent.

(4) Plaintiff has raised the rent more than the amount allowed under Civ. Code § 1946.12, and the only unpaid rent is the unauthorized amount

<u>Check this box if:</u> Your landlord illegally raised your rent and is now evicting you because you could not afford the rent increase.

- For example: your landlord raised the rent 11% which is more than the law allows, you continued to pay your old rent amount, Landlord is now evicting you because you didn't pay the extra money.
- For example: your landlord raised the rent more than twice in one year.

(5) Plaintiff violated the Tenant Protection Act in another manner that defeats the complaint

<u>Check this box if:</u> Your landlord is evicting you in another way that may violate the Tenant Protection Act.

For example: your landlord failed to notify you and your household of the protections under the Tenant Protection Act.

3.i. Plaintiff accepted rent from defendant to cover a period of time after the date the notice to quit expired.

<u>Check this box if:</u> you paid enough rent to cover the time after the notice tells you to move out.

For example: Your eviction notice expired on September 15, 2020. On September 1, 2020, you paid your full September rent to your landlord rather than half the rent. This means that the landlord accepted rent from you to cover time after your notice tells you to move out.

3.j. Plaintiff seeks to evict defendant based on an act against defendant or a member of defendant's household that constitutes domestic violence, sexual assault, stalking, human trafficking, or abuse of an elder or dependent adult.

(This defense requires one of the following: (1) a temporary restraining order, protective order, or police report that is not more than 180 days old; OR (2) a signed statement from a qualified third party (e.g., a doctor, domestic violence or sexual assault counselor, human trafficking caseworker, or psychologist concerning the injuries or abuse resulting from these acts.)

<u>Check this box if:</u> you or a member of your household is a victim of violence or abuse and your landlord seeks to evict you because of acts that occurred related to that abuse (such as noise or property damage).

3.k. Plaintiff seeks to evict defendant based on defendant or another person calling the police or emergency assistance (e.g., ambulance) by or on behalf of a victim of abuse, a victim or crime, or an individual in an emergency when defendant or the other person believed that assistance was necessary.

<u>Check this box if:</u> yourlandlord seeks to evict you for calling the police when you or a member of your household was in danger or needed assistance.

3.1. Other affirmative defenses are stated in item 3m.

<u>Check this box if:</u> you have any other reason(s) why you think you should not be evicted. Check all boxes that apply in the attached from 3.I(A) through 3.I(J) and write in any additional defenses you may have in 3.I(K).

HOW TO FILL OUT ATTACHMENT 3M

If you check a box listed in Paragraph 3 of the UD -105 Answer Form, you must also check the corresponding line in a separate form MC -025, Attachment 3M to provide a short description of facts to explain how that defense applies to you.

Attached in this answer packet are Attachment 3M pages that you may use to describe the facts of each affirmative defense that you checked.

Sample Forms With Instructions

The following pages can help you fill out the forms you are going to file. Do not file these pages with the court. There are blank copies of these forms at the end of this packet for you to fill out and file.

This form is called the SUMMONS (SUM-130). This sample form is for your reference only.

If you were served this form, then it means your landlord has filed an eviction case against you in housing court. This is where you will find important information about your case.

How to read the Summons:

SUMMONS (CITACIÓN JUDICIAL)

UNLAWFUL DETAINER—EVICTION (RETENCIÓN ILÍCITA DE UN INMUEBLE—DESALOJO)

NOTICE TO DEFENDANT: (AVISO AL DEMANDADO):

Defendant = Tenant (You)

YOU ARE BEING SUED BY PLAINTIFF: (LO ESTÁ DEMANDANDO EL DEMANDA)

Plaintiff = Landlord/Owner

Here is where there will be a stamp from the court showing the

SUM-130

date the case was opened.

NOTICE! You have been sued. The court may decide against you without your being heard unless you respond within 5 days. You have 5 DAYS, not counting Saturdays and Sundays and other judicial holidays, after this summons and legal papers are served on you to file a written response at this court and have a copy served on the plaintiff. ¡AVISO! Usted ha sido demandado. Si no responde dentro de 5 dias, el tribunal puede emitir un fallo en su contra sin una audiencia. Una vez que le entreguen esta citación y papeles legales, solo tiene 5 DÍAS, sin contar sábado y domingo y otros dias feriados del tribunal, para presentar una respuesta por escrito en este tribunal y hacer que se entregue una copia al

A letter or phone call will not protect yo must be in proper legal form if you wan case. There may be a court form that y response. You can find these court form at the California Courts Online Self-Hell (www.courts.ca.gov/selfhelp), your cou courthouse nearest you. If you do not fi time, you may lose the case by default, money, and property may be taken with

the court.

REMINDER:

You only have <u>FIVE DAYS</u> to respond with your Answer form. If you don't respond, then the Landlord can win by default.

lefónica no lo protege. Su respuesta en formato legal correcto si desea que te. Es posible que haya un formulario su respuesta. Puede encontrar estos a información en el Centro de Ayuda (www.sucorte.ca.gov), en la biblioteca en la corte que le quede más cerca. Si tiempo, puede perder el caso por falta odrá quitar su sueldo, dinero y bienes

There are other legal requirements. You may want to call an attorney right away. If you do not know an attorney, you may want to call an attorney referral service. If you cannot afford an attorney, you may be eligible for free legal services from a nonprofit legal services program. You can locate these nonprofit groups at the California Legal Services website (www.lewhelpca.org), the California Courts Online Self-Help Center (www.courts.ca.gov/selfhelp), or by contacting your local court or county bar association.

Hay otros requisitos legales. Es recomendable que llame a un abogado inmediatamente. Si no conoce a un abogado, puede llamar a un servicio de remisión a abogados. Si no puede pagar a un abogado, es posible que cumpla con los requisitos para obtener servicios legales gratuitos de un programa de servicios legales sin fines de lucro. Puede encontrar estos grupos sin fines de lucro en el sitio web de California Legal Services, (www.lawhelpcalifornia.org), en el Centro de Ayuda de las Cortes de California, (www.sucorte.ca.gov) o poniéndose en contacto con la corte o el colegio de abogados local.

FEE WAIVER: If you cannot pay the fliing fee, ask the clerk for a fee waiver form. NOTE: The court has a statutory lien for waived fees and costs on any settlement or arbitration award of \$10,000 or more in a civil case. The court's lien must be paid before the court will dismiss the case.

EXENCIÓN DE CUOTAS: Si no puede pagar la cuota de presentación, pida al secretario de la corte que le dé un formulario de exención de pago de cuotas. AVISO: Por ley, la corte tiene derecho a reclamar las cuotas y los costos exentos con un gravamen sobre cualquier cantidad de \$10,000 ó más recibi mediante un acuerdo o una concesión de arbitraje en un cas derecho civil. Tiene que pagar el gravamen de la corte antes que la corte pueda desestimar el caso.

Here is your Case Number

 The name and address of the court is: (El nombre y dirección de la corte es):

- Court's Address

CASE NUMBER (número del caso):

 The name, address, and telephone number of plaintiff's attorney, or plaintiff without an attorney, is: (El nombre, la dirección y el número de teléfono del abogado del demandante, o del demandante que no tiene abogado, es):

Plaintiff's (your landlord's) or | Plaintiff's attorney's name and address will be here. YOU WILL NEED TO SERVE YOUR ANSWER TO THIS ADDRESS.

LAWFUL DETAINER—EVICTION

Code of Civil Procedure, §§ 412.20, 415.456, 1167

www.courfs.ca.go

		Page 2 of the Sumr	nons (SUM-13	0)		
s sample page is	for your re	eference only.			Here is y Case Num	
	Disintiff	= Landlord/Owner				SUM-1
PLAINTIFF (Name):	Piairiiii	= Landiora/Owner		CASE NUMBER:		
DEFENDANT (Name):	Defenda	int = Tenant (You)				
	e advice or assi	unlawful detainer assistant istance with this form. (If plain on the next page.)] d wful
4. Unlawful detainer a	ssistant (comp	lete if plaintiff has received ar	ny help or advice for p	ay from an unlaw	ful detainer assist	tant):
a. Assistant's name	ei.					
b. Telephone no.:						
c. Street address, o	city, and zip:					
d. County of registr	ation:					
e. Registration no.:						
f. Registration expi	res on (date) :					
Date: (Fecha)			Clerk, by (Secretario)			, Dep (Adiu
[SEAL]	5. NOTI a. [b. [c. [d. [as an occupant. on behalf of (specify): cder: CCP 416.10 (corp. CCP 416.20 (def	ED: You are served nt. or the fictitious name of poration). unct corporation). ociation or partnership upant).	f (specify): CCP 41	6.60 (minor). 6.70 (conservated 6.90 (authorized pecify):	
			1			
		If this section is that you were served Remember, you on with your Answer the Landlord can Sometimes Plainting	ved. nly have FIVE form. If you win by default	DAYS to respo	espond nd, then	
		you. You can alway copy of the Summ	s the Court cle	rk for a con	nplete	

SUM-130 [Rev. September 1, 2019]

SUMMONS—UNLAWFUL DETAINER—EVICTION

Page 2 of 2

This form is called the COMPLAINT (UD-100). You will need to have the Complaint with you in order to fill out your Answer (UD-105) form.

Sample Complaint and How to Read the Complaint (page 1 of 4)

	51 : .: (() () () ()	UD-100
ATTORNEY OR PARTY WITHOUT	Plaintiff's (your landlord's) or	FOR COURT USE ONLY
NAME:	Plaintiff's attorney's name and	
FIRM NAME:		
STREET ADDRESS: CITY:	address will be here. YOU WILL	
TELEPHONE NO:	NEED TO SERVE YOUR ANSWER	Here is where
EMAIL ADDRESS:	TO THIS ADDRESS.	
ATTORNEY FOR (name):	TO THIS ADDRESS.	there will be a
SUPERIOR COURT OF C	ALIFORNIA, COUNTY OF	stamp from the
STREET ADDRESS: MAILING ADDRESS:	4 4 4 4	court showing the
CITY AND ZIP CODE:	Court's Address	date the case was
BRANCH NAME:		opened.
PLAINTIFF:	Plaintiff = Landlard/Owner	openeu.
DEFENDANT:	Training Sandior at Switch	
DOES 1 TO	Defendant = Tenant (You)	Here is your
co	MPLAINT—UNLAWFUL DETAINER*	CASE NUMBER:
COMPLAINT	AMENDED COMPLAINT (Amendment Number):	Case Number
Jurisdiction (check all		
ACTION IS RECU	exceeds \$10,000 but does not exceed \$25,000. INLIMITED CIVIL CASE (amount demanded exceeds \$25,000) LASSIFIED by this amended complaint or cross-complaint (chul detainer to general unlimited civil (possession not in issue).	eck all that apply):] from limited to unlimited.] from unlimited to limited.
PLAINTIFF (name e alleges causes of a	Plaintiff = Landlord/Owner ction against DEFENDANT (name each):	
	Defendant = Tenant (You)	
	a public agency. (5) a corpo other (specify):	ration.
b. Plaintiff I	has complied with the fictitious business name laws and is doing b	usiness under the fictitious name of (specify):
	he court named above because defendant named above is in pos-	session of the premises located at (street
auuress, apt. r	Your address should	be here.
 The premises i 	in 3a are (check one)	
	hin the city limits of (name of city):	
(2) with	hin the unincorporated area of (name of county):	
 The premises i 	in 3a were constructed in (approximate year):	
4. Plaintiff's interest in	the premises is as owner other (specify):	
5. The true names and	d capacities of defendants sued as Does are unknown to plaintiff.	
* NOTE: Do not use this	s form for evictions after sale (Code Civ. Proc., § 1161a).	Page 1 of 4 Civil Code, § 1940 et sec;

Sample Complaint and How to Read the Complaint (page 2 of 4)

	UD-10
PLA	INTIFF: CASE NUMBER:
DEFE	NDANT:
6 -	On an about (data):
6. a.	
#6(a)-(f): How yo	fendant (name each):
agreed to rent	
from your Landlor	agreed to rent the premises as a month-to-month tenancy other tenancy (specify):
and what kind of	agreed to pay rent of S payable monthly other (specify frequency):
	agreed to pay rent on the list of the month other day (specify).
rental agreemen	
you have	plaintiff. (3) plaintiff's predecessor in interest.
	(2) plaintiff's agent. (4) Other (specify):
C.	
	(1) subtenants. (2) assignees.
	(3) Other (specify):
#=/ \ # > -c	The agreement was later changed as follows (specify):
#7(a)-(b): If	
Landlord believes	
your unit is	A copy of the written agreement, including any addenda or attachments that form the basis of this complaint, is attached and labeled Exhibit 1. (Required for residential property, unless item 6f is checked. See Code Civ. Proc., § 1166.)
subject to CA	(For residential property) A copy of the written agreement is not attached because (specify reason):
rent control or	(1) The written agreement is not in the possession of the landlord or the landlord's employees or agents.
just cause	(2) This action is solely for nonpayment of rent (Code Civ. Proc., § 1161(2)).
7. T	he tenancy described in 6 (complete (a) or (b))
а	
	is exempt is (specify):
b	is subject to the Tenant Protection Act of 2019.
8. (0	Complete only if item 7b is checked. Check all applicable boxes.)
#8(a)-(c): If	The tenancy was terminated for at-fault just cause (Civil Code, § 1946.2(b)(1)).
	The tenancy was terminated for no-fault just cause (Civil Code, § 1946.2(b)(2)) and the plaintiff (check one)
Landlord believes	(1) [] waived the payment of rent for the final month of the tenancy, before the rent came due, under
you are at-fault	section 1946.2(d)(2), in the amount of \$
or have no-fault	(2) provided a direct payment of one month's rent under section 1946.2(d)(3), equaling \$
	to (name each defendant and amount given to each):
C.	Because defendant failed to vacate, plaintiff is seeking to recover the total amount in 8b as damages in this action.
9. a.	Defendant (name each):
	Determine (name caus).
#9(a): The	was accord the following action on the same data and in the same
eviction notice	was served the following notice on the same date and in the same manner:
you were	(1) 3-day notice to pay rent or quit (5) 3-day notice to perform covenants or quit
supposed to	(2) 30-day notice to quit (not applicable if item 7b checked) (3) 50-day notice to quit (6) 3-day notice to quit under Civil Code, § 1946.2(c)
receive from	Prior required notice to perform covenants served (date):
your Landlord	(4) 3-day notice to quit (7) Other (specify):
, , , , , , , , , , , , , , , , , , , ,	

UD-100 [Rev. September 1, 2020]

COMPLAINT-UNLAWFUL DETAINER

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Sample Complaint and How to Read the Complaint (page 3 of 4)

				UD-100
	P	LAIN	TIFF:	CASE NUMBER:
	DEF	FEND	DANT:	
	_			
	9.	b.	(1) On (date): the period stated in the notice che	cked in 9a expired at the end of the day.
#9(b)-(f):			(2) Defendants failed to comply with the requirements of the notice by that date.	-
What was		C.	All facts stated in the notice are true.	
stated on the	2	d.	The notice included an election of forfeiture.	
eviction notice	e	е.	A copy of the notice is attached and labeled Exhibit 2. (Required for reside When Civil Code, § 1946.2(c), applies and two notices are required, provid	
		f.	One or more defendants were served (1) with the prior required notice und notice, (3) on a different date, or (4) in a different manner, as stated in Atta statement providing the information required by items 9a—e and 10 for each	chment 10c. (Check item 10c and attach a
	10.	а.	The notice in item 9a was served on the defendant named in item 9a as fol	lows:
#10(~) (~)	بدال		(1) By personally handing a copy to defendant on (date):	
#10(a)-(d):			(2) By leaving a copy with (name or description):	
you were ser			a person of suitable age and discretion, on (date):	at defendant's
the eviction n	otic	ce	residence business AND mailing a copy to defendant at de	•
				endant's residence or usual place of business.
			(3) By posting a copy on the premises on (date):	
			AND giving a copy to a person found residing at the premises AND m	alling a copy to detendant at the premises
			on (date):	
			(a) because defendant's residence and usual place of business can	
			(b) because no person of suitable age or discretion can be found the	
#11: If you	r		(4) [(Not for 3-day notice; see Civil Code, § 1946, before using) By sendin addressed to defendant on (date):	
fixed-term			 (Not for residential tenancies; see Civil Code, § 1953, before using) Ir commercial lease between the parties 	the manner specified in a written
lease expired	d	b.	(Name):	
		l	was served on behalf of all defendants who signed a joint written rental agreeme	nt.
#12: How		C.	Information about service of notice on the defendants alleged in item 9f is	stated in Attachment 10c.
much unpaid		d.	Proof of service of the notice in item 9a is attached and labeled Exhibit 3.	
rent your	11.	П	Plaintiff demands possession from each defendant because of expiration of a fit	xed-term lease.
Landlord	12.		At the time the 3-day notice to pay rent or quit was served, the amount of rent of	
	13.		The fair rental value of the premises is \$ per day.	
says you owe		_		on demands and a Code of Chill Broad on
	14.		Defendant's continued possession is malicious, and plaintiff is entitled to statute section 1174(b). (State specific facts supporting a claim up to \$600 in Attachme	
	15.		A written agreement between the parties provides for attorney fees.	
	16.		Defendant's tenancy is subject to the local rent control or eviction control ordina date of passage):	ince of (city or county, title of ordinance, and
#16: If Land	dlor	٠d		
believes your	· un	it		
is subject to				
or county r		•	tiff has met all applicable requirements of the ordinances.	
control or evi			Other allegations are stated in Attachment 17.	
		บท	tiff accepts the jurisdictional limit, if any, of the court.	
protection	15		and acceptance of particular and	

UD-100 [Rev. September 1, 2020]

COMPLAINT-UNLAWFUL DETAINER

Page 3 of 4

Sample Complaint and How to Read the Complaint (page 4 of 4)

PLAINTIFF: DEFENDANT:				CASE NUMBER:
19. PLAINTIFF REQUESTS				
 a. possession of the premises. b. costs incurred in this proceeding: c. past-due rent of \$ 	f. g.	damages in the am as stated in item 8: damages at the rat date:	\$	of waived rent or relocation assistance ed in item 13 from
#19(a)-(i): What Landlord is requesting from you, including back rent and damages Refer to this to fill out #2 on your Complaint.	h. i.	for each day that defenda		emain in possession through entry of judgment. \$600 for the conduct alleged in item 14.
20. Number of pages attached (specify):				
 (Complete in all cases.) An unlawful determination give advice or assistance with 	ainer			did
detainer assistant, complete a-f.) a. Assistant's name:		C.	Tel	ephone no.:
Street address, city, and zip code:		d.		unty of registration:
		е.		gistration no.:
		f.		pires on (date):
Date:				
(TYPE OR PRINT NAME)				(SIGNATURE OF PLAINTIFF OR ATTORNEY)
(Use a different verification form if to I am the plaintiff in this proceeding and have read the California that the foregoing is true and correct.				
Date:				
		•		
(TYPE OR PRINT NAME)				(SIGNATURE OF PLAINTIFF)

Page 16 of 25 (excluding blank court forms at end of packet)

COMPLAINT—UNLAWFUL DETAINER

UD-100 [Rev. September 1, 2020]

	UD-105
ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER:	FOR COURT USE ONLY
NAME: YOUR NAME(S)	
FIRM NAME:	
STREET ADDRESS: YOUR STREET ADDRESS	
CITY: CITY STATE: CA ZIP CODE: ZIP CODE	
TELEPHONE NO.: YOUR PHONE NUMBER FAX NO.:	
EMAIL ADDRESS: YOUR EMAIL ADDRESS	
ATTORNEY FOR (name): Defendant in pro per	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF YOUR COUNTY	
STREET ADDRESS: Court's Address	
MAILING ADDRESS: (conv it from the bottom of no 1 of the "Summone"	
BRANCH NAME: SUM-130 form)	
PLAINTIFF: YOUR LANDLORD'S NAME (copy it from top of the Summons) DEFENDANT: YOUR NAME(S) (copy it from the top of the Summons)	<u>'</u>
DEFENDANT: YOUR NAME(S) (copy it from the top of the Summons)	
ANOMED THU AMELL DETAINED	CASE NUMBER: YOUR CASE NUMBER
ANSWER—UNLAWFUL DETAINER	(copy it exactly from the Summons)
Defendant (each defendant for whom this answer is filed must be named and must significant for the control of the control	
answers the complaint as follows: Look at #19 on page 4 of the Complaint. Check ONLY ONE of the next two boxes: box A. If it is over \$1,000 then check a. Defendant generally denies each statement of the complaint. (Do not check \$1,000.)	plaint. If the amount is under \$1,000, chook box B. this box if the complaint demands more than
b. Defendant admits that all of the statements of the complaint are true EXCE	PT
(1) defendant claims the following statements of the complaint are false (sta	
explain below or, if more room needed, on form MC-025): Explana	
· · · · · · · · · · · · · · · · · · ·	
Look at the Complaint and list which numbers from #1 to #:	19 have information that you know is
false. Common examples: 1, 9, 10, 11, 12, 14.	45 1141 ***
*** IF YOU CHECKED 2(b), DO NOT LEAVE THIS SECTION BL	
(2) defendant has no information or belief that the following statements of the	e complaint are true, so defendant denies
them (state paragraph numbers from the complaint or explain below or, Explanation is on MC-025, titled as Attachment 2b(2).	·
Look at the Complaint and list which numbers from #1 to #19 you examples: 2, 4, 7, 8, 13, 15, 16.	
*** IF YOU CHECKED 2(b), DO NOT LEAVE THIS SECTION BL	
 AFFIRMATIVE DEFENSES (NOTE: For each box checked, you must state brief facts room needed, on form MC-025.) * LOOK AT THE AFFIRMATIVE DEFENSES G 	
a. (Nonpayment of rent only) Plaintiff has breached the warranty to provide ha	bitable premises.
b. (Nonpayment of rent only) Defendant made needed repairs and properly de	ducted the cost from the rent, and plaintiff did

before the notice to pay or quit expired, defendant offered

Plaintiff served defendant with the notice to quit or filed the complaint to retaliate against defendant.

defendant in violation of the Constitution or the laws of the United States or California.

(Also, briefly state in item 3m the facts showing violation of the ordinance.)

By serving defendant with the notice to quit or filing the complaint, plaintiff is arbitrarily discriminating against the

Plaintiff's demand for possession violates the local rent control or eviction control ordinance of (city or county, title of

d.

e.

f.

g.

not give proper credit.

(Nonpayment of rent only) On (date):

ordinance, and date of passage):

the rent due but plaintiff would not accept it.

Plaintiff waived, changed, or canceled the notice to guit.

CASE NUMBER:

YOUR CASE NUMBER

3.	h.		Plaintiff's demand for possession is subject to the Tenant Protection Act, Civil Code section 1946.2 or 1947.12, and is not in compliance with the act. (Check all that apply and briefly state in item 3m the facts that support each.)
			(1) Plaintiff failed to state a just cause for termination of tenancy in the written notice to terminate.
			(2) Plaintiff failed to provide an opportunity to cure any alleged violations of terms and conditions of the lease (other than payment of rent) as required under Civ. Code, § 1946.2(c).
			(3) Plaintiff failed to comply with the relocation assistance requirements of Civ. Code, § 1946.2(d).
			(4) Plaintiff has raised the rent more than the amount allowed under Civ. Code, § 1946.12, and the only unpaid rent is the unauthorized amount.
			(5) Plaintiff violated the Tenant Protection Act in another manner that defeats the complaint.
	i.		Plaintiff accepted rent from defendant to cover a period of time after the date the notice to quit expired.
	j.		Plaintiff seeks to evict defendant based on an act against defendant or a member of defendant's household that constitutes domestic violence, sexual assault, stalking, human trafficking, or abuse of an elder or a dependent adult. (This defense requires one of the following: (1) a temporary restraining order, protective order, or police report that is not more than 180 days old; OR (2) a signed statement from a qualified third party (e.g., a doctor, domestic violence or sexual assault counselor, human trafficking caseworker, or psychologist) concerning the injuries or abuse resulting from these acts.)
	k.		Plaintiff seeks to evict defendant based on defendant or another person calling the police or emergency assistance (e.g., ambulance) by or on behalf of a victim of abuse, a victim of crime, or an individual in an emergency when defendant or the other person believed that assistance was necessary.
	I .	X	Other affirmative defenses are stated in item 3m.
	m.	(Provid	de facts for each item checked above, either below, or, if more room needed, on form MC-025):
		X	Description of facts is on MC-025, titled as Attachment 3m.

REMINDER:

Use the Affirmative Defenses Guide included in this packet to know which boxes to check in #3. We recommend filling out this form side-by-side with the Guide.

DON'T FORGET to complete the Attachments (number): 3M on the MC-025 forms after the signature page!

CASE NUMBER:
YOUR CASE NUMBER

4.	OTHER STATEMENTS
	a. Defendant vacated the premises on (date):
	b. X The fair rental value of the premises alleged in the complaint is excessive (explain below or, if more room needed, on form MC-025):
	Explanation is on MC-025, titled as Attachment 4b.
	The fair rental value of the premises is excessive if the landlord is in breach of the warranty
	of habitability.
	c. Other (specify below or, if more room needed, on form MC-025 in attachment):
	Other statements are on MC-025, titled as Attachment 4c.
5.	DEFENDANT REQUESTS
	a. that plaintiff take nothing requested in the complaint.
	 b. costs incurred in this proceeding. c. X reasonable attorney fees.
	d. x that plaintiff be ordered to (1) make repairs and correct the conditions that constitute a breach of the warranty to provide
	habitable premises and (2) reduce the monthly rent to a reasonable rental value until the conditions are corrected.
	e. X Other (specify below or on form MC-025):
	All other requests are stated on MC-025, titled as Attachment 5e.
	Relief from forfeiture and any such other relief as the court may deem just and proper.
6.	Number of pages attached: # of pages
	UNLAWFUL DETAINER ASSISTANT (Bus. & Prof. Code, §§ 6400-6415)
7.	(Must be completed in all cases.) An unlawful detainer assistant x did not did for compensation give advice or
	assistance with this form. (If defendant has received any help or advice for pay from an unlawful detainer assistant, state):
	a. assistant's name: b. Telephone number:
	c. Street address, city, and zip code:
	d. County of registration: e. Registration number: f. Expiration date:
(E	ach defendant for whom this answer is filed must be named in item 1 and must sign this answer unless his or her attorney signs.)
	PRINT YOUR NAME(S) SIGN YOUR NAME(S) & sign AGAIN belo
_	(TYPE OR PRINT NAME) (SIGNATURE OF DEFENDANT OR ATTORNEY)
2	nd Defendant's Name (if applicable) 💮 🗼 2nd Defendant's Signature (if applicable
_	(TYPE OR PRINT NAME) (SIGNATURE OF DEFENDANT OR ATTORNEY)
	VERIFICATION (Use a different verification form if the verification is by an attorney or for a corporation or partnership.)
Ιa	im the defendant in this proceeding and have read this answer. I declare under penalty of perjury under the laws of the State of
Ca	alifornia that the foregoing is true and correct. Date: TODAY'S DATE
_	PRINT_YOUR NAME(S) (TYPE OR PRINT NAME) SIGN YOUR NAME(S) AGAIN (SIGNATURE OF DEFENDANT)
	(TITE ON FINIT MAINE) (SIGNATURE UP DEFENDANT)

FW-001 Request to Waive Court Fees	CONFIDENTIAL
Make sure you read this carefully.	Clerk stamps date here when form is filed.
If you are getting public benefits, are a low-recome person, or do not have enough income to pay for your household's basic needs and your court fees, you may use this form to ask the court to waive your court fees. The court may order you to answer questions about your finances. If the court waives the fees, you may still have to pay later if:	This is a sample. Make sure to fill out the other form also titled "FW-001" in this packet.
 You cannot give the court proof of your eligibility, Your financial situation improves during this case, or You settle your civil case for \$10,000 or more. The trial court that waives 	Fill in court name and street address: Superior Court of California, County of
your fees will be a line waived fee Fill out questions 1 2 3 Your Info Name: working, write "—-"	Ask the clerk to stamp the court address here when you file.
Street or n City: Phone: Phone: Your Jot Your Jot Street or n Given a lawyer, Write "In pro per."	Case Number: Write your case number here.
Name of employer:	last name of Plaintiff v. last name of Defendant
Your Lawyer, if you have one (name, firm or affiliation, address, phone is a. The lawyer has agreed to advance all or a portion of your fees or costs (b. (If yes, your lawyer must sign here) Lawyer's signature:	
Supreme Court, Court of Appeal, of Appealate Court fees (form Appeal, of Appealate Court fees (form Ap	ou check all the boxes that apply to you. Hers $\begin{pmatrix} 3 \end{pmatrix}$ and $\begin{pmatrix} 9 \end{pmatrix}$ on the back of this form. Hers $\begin{pmatrix} 9 \end{pmatrix}$ are changes monthly, then fill the bers $\begin{pmatrix} 8 \end{pmatrix}$ through $\begin{pmatrix} 11 \end{pmatrix}$
Family Size Family Income Family Size Family Income Family Size	e Family Income If more than 6 people
1 \$1,301.05 3 \$2,221.88 5 2 \$1,761.46 4 \$2,682.30 6	\$3,142.71 at home, add \$460.42 \$3,603.13 for each extra person.
Write today's date here do not have enough income to pay for my household's basic needs (check one and you must fill out page 2): waive all court fees and costs waive some of the let me make payments over time Check here if you asked the court to waive your court fees for this case (If your previous request is reasonably available, please attach it to the letter on this form and all attachments is true and correct. Date:	and the court fees. I ask the court to: e court fees in the last six months. s form and check here:)
Print defendant's name here. (See SUM—130).	Sign your name here
Print your name here Judicial Council of California, www.courts.ca.gov Revised March 15, 2019, Mandatory Form Government Code, § 68633 Cal. Rules of Court, rules 3.51, 8.26, and 8.818	FW-001, Page 1 of 2

			Case Numb	er:	
Your name:	Write your name exactly as written on Sum	mons (SUM-130)	1	Write your case nu	mber here.
If you checked sheet of paper	5a on page 1, do not fill out below. If y 5c, you must fill out this entire page.	If you need more s	pace, attach i number at th	form MC-025 c	
O F Obest	Check (7) if your income changes from		and Property		
If it doe the pas	f you check (7) then fill out (8) thro		al accounts (List t	ank name and amo	\$
Your Gross	Monthly Income				S
a. List the sou	arce and amount of any income you get each month,	(2)			s
including: w	ld support retirement, social security, disability	(3)			s
unemploym	nent, military bass all	c. Cars, boa	ts, and other vehic	Fair Market	How Much You
veterans pa	nent, military bassall- lf you checked 5b on	Make	/ Year	Value	Still Owe
	gambling or lottery was front, fill 8 out	. (,)			_\$
(1)	-	(2)		\$	\$\$
(2)		d. Real estat	e	Fair Market	How Much You
(3)		Addr	ess	Value	Still Owe
(4)	<u> </u>	(1)		\$	_\$
b. Your total	monthly income:	d 5c on the front,	make sure t	o fill	_\$
9 Household	Income	e form (8) throug		ure, furs,	How Much You
depend in v	whole or in part on you for supp		$\overline{}$	lue	Still Owe
depend in v	whole or in part for support. Gross Monthly	(1)		\$	\$
Name	Age Relationship Income	(2)		3	*
	\$	(11) Your Month	ly Deductions	and Expenses	
		List any pa	•	nd the monthly amor	
	\$\$				
	thly income of persons above: \$			S_	
		(4)		Š	
Total monthly in househ	old income (6b plus 9b): \$		ouse payment & m	aintenance	\$
			household supplie	is	s
		d. Utilities an	d telephone		\$
		e. Clothing f. Laundry a	nd cleaning		s
			nd dental expense	s	s
		h. Insurance	(life, health, accid	ent, etc.)	\$
		i. School, ch			s
			usal support (anot	pair and insurance	s
			t payments (list ea		<u>-</u>
		Paid to:			
					s
		223			\$
To list any other	facts you want the court to know, such as	(3)			
	expenses, etc., attach form MC-025 or		rnings withheld by		5
	paper and write Financial Information and	Paid to:		(list each below).	How Much?
your name and c	ase number at the top.				\$
	Check here if you attach another page.				\$
Important! If yo	our financial situation or ability to pay	(3)			\$
	oves, you must notify the court within five	Total monthly ex	nensee (add 4)	la -11n aboval	
days on form F	W-010.		Perises (and)	- 1111 BOOVE/.	

(Superior Court)	-
1) Person who asked the court to waive court fees:	
Write Defendant(s) full name(s) exactly as written on Summons (SUM-13	
Write your street address (Don't forget your apartment # if you have one	e)
Write your city, state and zip code 2 Lawyer, ir person in turas one (name, jum name, address,	
2) Lawyer, it person in Grass one (name, firm name, address, phone number, e-mail, and State Bar number):	
Write "in pro per"	Fill in court name and street address: Superior Court of California, County of
	Ask the clerk to stamp the court
	address here when you file.
Write the date you a	
A request to waive court fees was filed on (date): filing this form.	Fill in case number and name:
The court made a previous fee waiver order in this case on (date)	Case Nu Write your case number her
	Case Name:
Notice: The court may order you to answer questions about your finances a do not pay, the court can make you pay the fee circumstances during this case that increases you pay the fees. If you settle your civil case for \$10,000 or more, the trial court within the fees.	and later order you to pay back the waived es and also charge you collection fees. If the our ability to pay fees and costs, you must case, the trial court may order the other side ourt will have a lien on the settlement in the
Notice: The court may order you to answer questions about your finances at do not pay, the court can make you pay the fee circumstances during this case that increases y notify the trial court within five days. (Use form FW-010.) If you win your to pay the fees. If you settle your civil case for \$10,000 or more, the trial commount of the waived fees. The trial court may not dismiss the case until the court makes the following orders: a. The court grants your re (1) Fee Waiver. The court grants your re-	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other sic purt will have a lien on the settlement in the e lien is paid. Request to Waive Additional Court Fees of this
Notice: The court may order you to answer questions about your finances as a sure to check this box. In our pay, the court can make you pay the fee circumstances during this case that increases you to pay the fees. If you settle your civil case for \$10,000 or more, the trial commount of the waived fees. The trial court may not dismiss the case until the court makes the following orders: After reviewing your: The court grants your reconstruction of the court grants your grants your reconstruction of the court grants your g	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other sic purt will have a lien on the settlement in the elien is paid. Request to Waive Additional Court Fees of this Ind costs listed below. (Cal. fees for the following:
Notice: The court may order you to answer questions about your finances as a sure to check this box. In sure to check this box. In other trial court within five days. (Use form FW-010.) If you win your to pay the fees. If you settle your civil case for \$10,000 or more, the trial commount of the waived fees. The trial court may not dismiss the case until the court makes the following orders: a. The court grants your recent the court grants your recent form blank. Filing papers in superio Making copies and certifying copies	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other side ourt will have a lien on the settlement in the lien is paid. Request to Waive Additional Court Fees and costs listed below. (Cal. fees for the following: one hearing wing notice and certificates
Notice: The court may order you to answer questions about your finances at do not pay, the court can make you pay the fee circumstances during this case that increases you pay the fees. If you settle your civil case for \$10,000 or more, the trial commount of the waived fees. The trial court may not dismiss the case until the After reviewing your: After reviewing your: The court grants your re (1) Fee Waiver. The court grants your re (1) Fee Waiver. The court grants your re (1) Fee Waiver. The court grants your re (2) Fee Waiver and your re (3) Fee Waiver and your re (4) Fee Waiver and your re (5) Fee Waiver and your re (6) Fee Waiver and your re (7) Fee Waiver and your re (8) Filling papers in superior (9) Making copies and certifying copies (9) Sheriff's fee to give notice	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other side out will have a lien on the settlement in the elien is paid. Request to Waive Additional Court Fees and costs listed below. (Cal. fees for the following: one hearing wing notice and certificates anding papers to another court department
Notice: The court may order you to answer questions about your finances as a sure to check this box. In other trial court within five days. (Use form FW-010.) If you win your to pay the fees. If you settle your civil case for \$10,000 or more, the trial common of the waived fees. The trial court may not dismiss the case until the court makes the following orders: a. The court grants your recent the court grants your recent form blank. Filing papers in superio Making copies and certifying copies Making copies and certifying copies	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other side out will have a lien on the settlement in the elien is paid. Request to Waive Additional Court Fees and costs listed below. (Cal. fees for the following: one hearing wing notice and certificates anding papers to another court department
Notice: The court may order you to answer questions about your finances as a sure to check this box. Into the trial court within five days. (Use form FW-010.) If you win your to pay the fees. If you settle your civil case for \$10,000 or more, the trial commount of the waived fees. The stial court may not dismiss the case until the court makes the following orders: a. The court grants your recent the court grants your recent form blank. Filing papers in superio Making copies and certifying copies Sheriff's fee to give notice Reporter's fee for attendance at hearing or trial, if the court is and you request that the court provide an official reporter Assessment for court investigations under Probate Code sections.	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other sic purt will have a lien on the settlement in the elien is paid. Request to Waive Additional Court Fees and costs listed below. (Cal. fees for the following: one hearing wing notice and certificates anding papers to another court department is not electronically recording the proceeding to 1513, 1826, or 1851
Notice: The court may order you to answer questions about your finances as a sure to check this box. In otify the trial court within five days. (Use form FW-010.) If you win your to pay the fees. If you settle your civil case for \$10,000 or more, the trial common of the waived fees. The stial court may not dismiss the case until the court makes the following orders: a. The court grants your recent the court grants your recent form blank. Filing papers in superio Making copies and certifying copies Sheriff's fee to give notice Reporter's fee for attendance at hearing or trial, if the court is and you request that the court provide an official reporter Assessment for court investigations under Probate Code section Preparing, certifying, copying, and sending the clerk's transcent in the court can make you pay the fee circumstances during this case that increases your to pay, the court can make you pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your to pay the fee circumstances during this case that increases your feet and you win your days. Request to Waive Court Fees Leave the remainder of the court feet and your feet an	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other side our will have a lien on the settlement in the lien is paid. Request to Waive Additional Court Fees and costs listed below. (Cal. fees for the following: one hearing wing notice and certificates anding papers to another court department is not electronically recording the proceeding on 1513, 1826, or 1851 ript on appeal
Notice: The court may order you to answer questions about your finances as a sure to check this box. Into the trial court within five days. (Use form FW-010.) If you win your to pay the fees. If you settle your civil case for \$10,000 or more, the trial commount of the waived fees. The stial court may not dismiss the case until the court makes the following orders: a. The court grants your recent the court grants your recent form blank. Filing papers in superio Making copies and certifying copies Sheriff's fee to give notice Reporter's fee for attendance at hearing or trial, if the court is and you request that the court provide an official reporter Assessment for court investigations under Probate Code sections.	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other side our will have a lien on the settlement in the lien is paid. Request to Waive Additional Court Fees and costs listed below. (Cal. fees for the following: one hearing wing notice and certificates anding papers to another court department is not electronically recording the proceeding on 1513, 1826, or 1851 ript on appeal al under rule 8.130 or 8.834
Notice: The court may order you to answer questions about your finances as a sure to check this box. In otify the trial court within five days. (Use form FW-010.) If you win your to pay the fees. If you settle your civil case for \$10,000 or more, the trial common of the waived fees. The stial court may not dismiss the case until the court makes the following orders: a. The court grants your recent the court grants your recent form blank. Filing papers in superio Making copies and certifying copies Sheriff's fee to give notice Reporter's fee for attendance at hearing or trial, if the court is and you request that the court provide an official reporter Assessment for court investigations under Probate Code section Preparing, certifying, copying, and sending the clerk's transcript on apper	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other sic purt will have a lien on the settlement in the elien is paid. Request to Waive Additional Court Fees and costs listed below. (Cal. fees for the following: one hearing wing notice and certificates anding papers to another court department anot electronically recording the proceeding on 1513, 1826, or 1851 ript on appeal all under rule 8.130 or 8.834 gunder rule 8.835
circumstances during this case that increases y notify the trial court within five days. (Use form FW-010.) If you win your to pay the fees. If you settle your civil case for \$10,000 or more, the trial commount of the waived fees. The trial court may not dismiss the case until the After reviewing your: After reviewing your:	and later order you to pay back the waived es and also charge you collection fees. If the your ability to pay fees and costs, you must case, the trial court may order the other sic purt will have a lien on the settlement in the elien is paid. Request to Waive Additional Court Fees and costs listed below. (Cal. fees for the following: one hearing wing notice and certificates anding papers to another court department anot electronically recording the proceeding on 1513, 1826, or 1851 ript on appeal all under rule 8.130 or 8.834 gunder rule 8.835

T	Maria Company	420)	Case N	umber:
Your name:	Write your name exactly as written on Summons (SUM	-130)		Write your case number here.
_	arning! If Leave the remainder of this	unur ren	uppet for I	nearing or the court papers
	arning! If Leave the remainder of this			may be dismissed.
	ur reque form blank.	gives n	otice of	this Order (see date of service
on	Pay your fees and costs, or			
	File a new revised request that includes the incomp	lete item	s listed:	
	☐ Below ☐ On Attachment 4b(1)			
	E		- 1	
(2)	- 1	t you are Attachme	-	
			10(2)	
	The court has enclosed a blank Request for Hearing Ab			
	 (form FW-006). You have 10 days after the clerk gives Pay your fees and costs in full or the amount listed 			er (see date of service below) to:
	· Ask for a hearing in order to show the court more			form FW-006 to request
	hearing.)			
c. (1)	The court needs more information to decide whether to date on page 3. The hearing will be about the questions Below On Attachment 4c(1)			
(2)	Bring the items of proof to support your request, if reas Below On Attachment 4c(2)	sonably a	vailable	, that are listed:
	This is a Court Orde	ar.		
	This is a Godit Orde			

Order on Court Fee Waiver (Superior Court)

FW-003, Page 2 of 3

Your name:	Write your name exactly as written on Summons (SUI	Write your case number here.
Hearing Date	Dept.: Leave the remainder of this form blank.	and address of court if different from above:
request	g! If item c(1) is checked, and you do not go to court on to waive court fees, and you will have 10 days to pay you the court papers you filed with your request. If the papered.	our fees. If you miss that deadline, the court cannot
Date:	Signature of (check one):	Judicial Officer Clerk, Deputy
	Request for Accomm	odations
	Assistive listening systems, computer-assisted real-tim are available if you ask at least five days before the hea Accommodations by Persons With Disabilities and Res	aring. Contact the clerk's office for Request for
	Clerk's Certificat	e of Service
I certify that I a	um not involved in this case and (check one):	
This order v from (city):	was mailed first class, postage paid, to the party and attorney, if any, liste was mailed first class, postage paid, to the party and attorney, California, on the ficate of mailing is attached.	orney, if any, at the addresses listed in 1 and 2,
Date:		
	Clerk, by	, Deputy

This is a Court Order.

Name:

THE PERSON WHO FILLS OUT THIS DOCUMENT (CALLED THE "SERVER"): 1. CANNOT BE THE DEFENDANT(S) OR PLAINTIFF(S) IN THIS CASE, 2. MUST BE OVER THE AGE OF 18, AND 3. MUST MAIL THE DOCUMENTS LISTED IN 3. ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Write Defendant(s) full name exactly as written on Summons (SUM-130) Write Defendant(s) street address TELEPHONE NO FAX NO. (Optional): E-MAIL ADDRESS (Optional) ATTORNEY FOR (Name): Write "In Pro Per" SUPERIOR COURT OF CALIFORNIA, COUNTY OF Write the court address and branch name MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME PETITIONER/PLAINTIFF Write Plaintiff's full name exactly as written on SUM-130 RESPONDENT/DEFENDANT Write Defendant's full name(s) exactly as written on SUM-130 CASE NUMBER: PROOF OF SERVICE BY FIRST-CLASS MAIL—CIVIL Write the case number here (Do not use this Proof of Service to show service of a Summons and Complaint.) 1. I am over 18 years of age and not a party to this action. I am a resident of or employed in the county where the mailing My residence or business address is: Write date that docu-Write the address here of the person mailing the documents listed in 3. ments will be mailed On (date) I mailed from (city and state): Write the city and state where documents will be mailed the following documents (specify): Write the name of each document that will be mailed by the server Check box 4a. — For example: Answer (UD-105), Proof of Service (POS-030) follow instructions The documents are listed in the Attachment to Proof of Service by First-Class Mail—Civil (Documents Served) (form POS-030(D)). I served the documents by enclosing them in an envelope and (check one): a. Ly depositing the sealed envelope with the United States Postal Service with the postage fully prepaid. placing the envelope for collection and mailing following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid. The envelope was addressed and mailed as follows: a. Name of person served: Write Plaintiff's or Plaintiff's Attorney's name here b. Address of person served: Write Plaintiff's or Plaintiff's Attorney's name and address here. The information to be included here is located on page 1 of the Summons (SUM-130), paragraph 2. The name and address of each person to whom I mailed the documents is listed in the Attachment to Proof of Service by First-Class Mail—Civil (Persons Served) (POS-030(P)). I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Write the date server is signing this document Date: The server signs here The server prints name here (TYPE OR PRINT NAME OF PERSON COMPLETING THIS FORM) (SIGNATURE OF PERSON COMPLETING THIS FORM) orm Approved for Optional Use uticial Council of California Code of Civil Procedure, §§ 1013, 1013a PROOF OF SERVICE BY FIRST-CLASS MAIL—CIVIL POS-030 [New January 1, 2005] (Proof of Service)

Blank Forms to be Filed with the Court

These forms are for you to fill out and file. If you need help, read through the sample forms and instruction pages along with the Answer Guide in this packet.

			0D-10
ATTORNEY OR PARTY WITHOUT ATTORNEY	STATE BAR NUMBER:		FOR COURT USE ONLY
NAME:			
FIRM NAME:			
STREET ADDRESS: CITY:	STATE: ZIP CO	ODE:	
TELEPHONE NO.:	FAX NO.:	JUL.	
EMAIL ADDRESS:	TAXTO		
ATTORNEY FOR (name):			
SUPERIOR COURT OF CALIFORNIA, COUNT	Y OF		
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE;			
BRANCH NAME:			
PLAINTIFF:			
DEFENDANT:		5	
ANSWER-UNL	AWFUL DETAINER	CAS	SE NUMBER:
Defendant (each defendant for whom the signs):	nis answer is filed must be l	named and must sign thi	s answer unless his or her attorney
answers the complaint as follows: 2. Check ONLY ONE of the next two bo.		plaint (Da not about this	hav if the complaint demands more than
a. Defendant generally denies e \$1,000.)	ach statement of the comp	laint. (Do not check this	box if the complaint demands more than
b. Defendant admits that all of the	he statements of the compl	laint are true EXCEPT	
	owing statements of the com- room needed, on form MC-		aragraph numbers from the complaint or is on MC-025, titled as Attachment 2b(1)
them (state paragraph nui		or explain below or, if mo	mplaint are true, so defendant denies re room needed, on form MC-025):
AFFIRMATIVE DEFENSES (NOTE: For room needed, on form MC-025.)	or each box checked, you m	nust state brief facts to su	upport it in item 3m (page 2) or, if more
a. (Nonpayment of rent only) Pla	aintiff has breached the wa	rranty to provide habitab	le premises.
b. (Nonpayment of rent only) De not give proper credit.	efendant made needed rep	airs and properly deducte	ed the cost from the rent, and plaintiff did
c. (Nonpayment of rent only) Or the rent due but plaintiff woul		before the notice	to pay or quit expired, defendant offered
d. Plaintiff waived, changed, or	canceled the notice to quit.		
e. Plaintiff served defendant with	h the notice to quit or filed t	the complaint to retaliate	against defendant.
f. By serving defendant with the	e notice to quit or filing the o	complaint, plaintiff is arbi	trarily discriminating against the
defendant in violation of the C g. Plaintiff's demand for possess			ornia. I ordinance of <i>(city or county, title of</i>
ordinance, and date of passa	ige):		. 2.2and or fory or country, the or
(Also, briefly state in item 3m	the facts showing violation	i of the ordinance.)	

				CASE NUMBER:
3.	h.		Plaintiff's demand for possession is subject to the Tenant Protection Act, Civil not in compliance with the act. (Check all that apply and briefly state in item 3	
			(1) Plaintiff failed to state a just cause for termination of tenancy in the	written notice to terminate.
			(2) Plaintiff failed to provide an opportunity to cure any alleged violatio (other than payment of rent) as required under Civ. Code, § 1946.2	
			(3) Plaintiff failed to comply with the relocation assistance requirement	ts of Civ. Code, § 1946.2(d).
			(4) Plaintiff has raised the rent more than the amount allowed under C rent is the unauthorized amount.	iv. Code, § 1946.12, and the only unpaid
			(5) Plaintiff violated the Tenant Protection Act in another manner that	defeats the complaint.
	i.		Plaintiff accepted rent from defendant to cover a period of time after the date	the notice to quit expired.
	j.		Plaintiff seeks to evict defendant based on an act against defendant or a mem constitutes domestic violence, sexual assault, stalking, human trafficking, or a defense requires one of the following: (1) a temporary restraining order, promore than 180 days old; OR (2) a signed statement from a qualified third p sexual assault counselor, human trafficking caseworker, or psychologist) conditions acts.)	buse of an elder or a dependent adult. (This ptective order, or police report that is not party (e.g., a doctor, domestic violence or
	k.		Plaintiff seeks to evict defendant based on defendant or another person calling ambulance) by or on behalf of a victim of abuse, a victim of crime, or an individual the other person believed that assistance was necessary.	
	1.	✓	Other affirmative defenses are stated in item 3m.	
	m.	(Provid	de facts for each item checked above, either below, or, if more room needed, o	n form MC-025):
		✓	Description of facts is on MC-025, titled as Attachment 3m.	

CASE NUMBER:

4.	OTHER STATEMENTS					
	 a. Defendant vacated the premises on (date): b. The fair rental value of the premises alleged form MC-025): 	n the complaint	is excessive (explain belo	w or, if more roo	m needed, on
	Explanation is on MC-025, titled as Att	achment 4b.				
	The fair rental value of the premises is ex	cessive if the la	andlord is in	breach of t	he warranty of l	habitability
	c. Other (specify below or, if more room needed	d, on form MC-0:	25 in attachme	ent):		
	Other statements are on MC-025, titled	as Attachment	4c.			
5.	DEFENDANT REQUESTS a. that plaintiff take nothing requested in the complaint	t.				
	b. costs incurred in this proceeding.c. reasonable attorney fees.					
	d. that plaintiff be ordered to (1) make repairs a					• •
	habitable premises and (2) reduce the month	ly rent to a reaso	onable rental v	alue until th	e conditions are	corrected.
	e. Other (specify below or on form MC-025): All other requests are stated on MC-025	5. titled as Attacl	nment 5e.			
	Relief from forfeiture and any other relief			oper.		
6.	Number of pages attached:					
	UNLAWFUL DETAINER ASSISTA	NT (Bus. & Prof	. Code, §§ 64	00-6415)		
7.	(Must be completed in all cases.) An unlawful detaine	r assistant 🔻	did not	did		ion give advice or
	assistance with this form. (If defendant has received an				detainer assistar	it, state):
	a. assistant's name:c. Street address, city, and zip code:	D	. Telephone	number.		
		Registration nu	ımher		f. Expiration da	te:
(Fa	ach defendant for whom this answer is filed must be nam	_		s answer ur		
() _	_			
	(TYPE OR PRINT NAME)		(SIGN	ATURE OF DEFE	NDANT OR ATTORNEY)
	(TYPE OR PRINT NAME)	•	(SIGN)	ATURE OF DEFE	NDANT OR ATTORNEY)
	VF	RIFICATION				
	(Use a different verification form if the verification that the verification that the foregoing is true and correct. Date:	ation is by an att				the State of
	(TVDE OR DRIVET VALUE)	_ •				
	(TYPE OR PRINT NAME)		(8	SIGNATURE OF I	DEFENDANT)	

SHORT TITLE:	CASE NUMBER:
ATTACHMENT (Number):	
(This Attachment may be used with any Judicial C	Council form.)
3.a The landlord failed to make the following repairs despite know	wing I needed these repairs:
Defective Walls, Floors, or Weather Protection:Falling plasterDamp wallsBroken windowsHoCeiling leaksPeeling PaintWindows/doors leakDoors/windows lack locks, or are otherwise not secureFloor covering in dangerous condition Mold or MildewOther:	oles in ceiling/walls _Broken or defective floors
Defective Plumbing (Gas, Water Supply, or Sewage System): Leaky pipes for:gaswatersewage disposal Drains clogged in:kitchen sinkbath sinkshow Toilet defective:won't flushbroken/leaksclogg Lack of hot/cold running water in:bathroomkitchen Sewage backs up in:kitchen sinkbath sinkshow No hot waterUnsafe hot water Other:	ed
Defective Electrical Lights, Wiring, and Related Equipment:Lights do not workSwitches do not workPlugs do notExposed wiringSwitches or outlets lack safe cover platesOther:	ot work
Defective Heating or Cooking Facilities:Not enough or inconsistent heatNo heat – Heater brokenHeating system unsafeAir conditioning brokenStove/oven does not workStove/oven unsafeOther:	
Unsafe or Unsanitary Conditions in Unit or in Common Areas Pest\Vermin infestation: Roaches; Rats; Mice; Trash bins inadequate\unclean\not emptied often enough Stairs or railings broken\unsafe Inadequate lighting or sec Unsafe paving\tripping hazards Missing or defective smok properly maintained Structural defects in building	urity
Other	
3.b. I (we) owe less rent because I (we) paid for and deducted fro repairs:	m the rent the cost of the following
(If the item that this Attachment concerns is made under penalty of perjury, all statement Attachment are made under penalty of perjury.)	nts in this Page 1 of 5 (Add pages as required)

SHORT TITLE:	CASE NUMBER:
ATTAC	HMENT (Number):
(This Attachment may be	used with any Judicial Council form.)
, I (v	ve) offered the rent due to the landlord.
for eviction. In the past, Landlord didn't have a proble	ritten notice that the alleged conduct would be grounds
3.e. Retaliation: The landlord is retaliating agai	nst me (us) for asserting my (our) rights because:
\Children;Immigration Status/CitizenshipReligion;Gender\Sex;Sexual OrientaMarital Status;Disability (Physical or MentaSexual Harassment; Veteran Status; Arbitrary traits:	al);Source of Income; _ National Origin/Ancestry
	pecause of my disability/medical condition. The thy I am being evicted, I am requesting/ have requested a nied or failed to respond to my request.
3.g. I'm covered by a local rent or eviction confeviction control ordinance by:	
3.h. My home is subject to the Tenant Protection to comply with the Act (5) Landlord has not notified my household or required in Civil Code §1946.2(f) (5a) Landlord violated the Tenant Protection	·
3.i. I(we) paid \$ in rent to landlord on [DATE], after the notice to quit expired.	DATE] that covered rent through
(If the item that this Attachment concerns is made under penalty	of perjury, all statements in this Page 2 of 5
Attachment are made under penalty of perjury.)	(Add pages as required)

SHORT TITLE:	CASE NUMBER:
ATTACHMENT (Number):	
(This Attachment may be used with any Judicial Cou	uncil form.)
3.j. Landlord seeks to evict me/member of my household based on a human trafficking, or abuse of an elder or dependent adult and I have a co Temporary restraining order that was issued less than 180 days ag Protective order that was issued less than 180 days ago Police Report that was made less than 180 days ago Statement from a qualified third party (for example, doctor, domes counselor, human trafficking caseworker, or psychologist)	opy of one of the following: go
3.k. Landlord seeks to evict me based on myself or another person [DATE], I/or another person contacted emergency services protect from abuse/crime.	
	pay, or the days and time for int owed or when it was due. ie of emergency. Cal. Penal Code otice. Cal. Civil Code § 827 we the required opportunity to cure the date the termination or eviction to bring this eviction action because: I party in interest and is not

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page <u>3</u> o<u>f 5</u>

www.courtinfo.ca.gov

SHORT TITLE:	CASE NUMBER:	0 - 0
ATTACHMENT (Number):	<u> </u>	
(This Attachment may be used with any Judicial Col	uncil form.)	
3.I.(D) Special rules/laws apply because my home is a below mare federally subsidized housing program (e.g., public housing, Section 8), or(1) Landlord failed to comply with the CARES Act requirements by failing to provide at least 30 days' noticeissuing a notice before the CARES Act eviction moratorium on Julyissuing a notice or initiating an eviction while the property is in forbet(2) The notice of termination is defective in that it:demanded rent that was owed by the Housing Authority, not by meis based on rent that is not properly calculated based on my incomefails to state the grounds for termination in enough doetail to permit preparation of a defensefails to give 90-days' noticewas not served concurrently on the housing authorityLandlord does not have good cause for the eviction; allegations areLandlord failed to notify defendant of the right to request a hearing procedure available. Landlord failed to comply with applicable provisions of federal law.	r has a federally-backed mo /: / 24, 2020 earance e. e. t	ortgage.
3.I. (H) Mobile Home Tenancies I/we live in a mobile home park aLandlord failed to give a 60 day notice terminating the tenancy. Landlord failed to state specific or permissible reason for eviction in Landlord failed to provide a written lease to defendant(s). Landlord failed to provide a copy of Mobile Home Residency Law. Landlord failed to provide notice to legal and/or registered owners. Notice does not comply with requirements of the Mobile Home Residency.	n notice(s).	
3.I.(I) AB 3088 COVID-19 Tenant Relief Act of 2020:(1) Landlord is trying to evict me in order to "substantially remodel" us out before February 1, 2021 in violation of Code of Civil Proc § 1179.0(4e) The notice fails to include required information about my COVI(5) Landlord did not provide me with an unsigned copy of a declarated hardship(7) Landlord cannot evict me because I provided a self-declarated for the covered period March 1, 2020 through August 31, 2020(8) Landlord cannot evict me before February 1, 2021 because I (w COVID-19 financial hardship for the period September 1, 2020 through Jarae prepared to pay 25% of the rent on or before January 31, 2021(12) Landlord is evicting me based on an agreement that tries to was COVID-19 Tenant Relief Act of 2020.	03.5(a)(3)(A)(ii) ID-19 related rights. ation of COVID-19 related fi on of COVID-19 financial have) provided a self-declarati anuary 31, 2021, and I (we)	inancial ardship on of have or
3.I.(J) COVID-19 Moratorium: This rental unit is subject to federal relating to evictions due to the COVID-19 crisis enacted before or after the		ım laws
(If the item that this Attachment concerns is made under penalty of perjury, all statements	s in this Page 4	o <u>f</u> 5
Attachment are made under penalty of perjury.)	(Add pages as	s required)

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page 5 of 5
(Add pages as required)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
Name:	
State bar number:	
Address:	
Addicas.	
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME: PETITIONER/PLAINTIFF:	1
FETHOREN FLAINTIIT.	
RESPONDENT/DEFENDANT:	
PROOF OF SERVICE BY FIRST-CLASS MAIL—CIVIL	CASE NUMBER:
(Do not use this Proof of Service to show service of a Summons a	and Complaint.)
 I am over 18 years of age and not a party to this action. I am a resident of or employed took place. 	
2. My residence or business address is:	
 On (date): I mailed from (city and state): the following documents (specify): Answer 	
The documents are listed in the Attachment to Proof of Service by First-Class Mai. (form POS-030(D)).	l—Civil (Documents Served)
 4. I served the documents by enclosing them in an envelope and (check one): a depositing the sealed envelope with the United States Postal Service with the b placing the envelope for collection and mailing following our ordinary business business's practice for collecting and processing correspondence for mailing. On placed for collection and mailing, it is deposited in the ordinary course of business a sealed envelope with postage fully prepaid. 	practices. I am readily familiar with this on the same day that correspondence is
5. The envelope was addressed and mailed as follows:a. Name of person served:	
b. Address of person served:	
·	
The name and address of each person to whom I mailed the documents is listed in by First-Class Mail—Civil (Persons Served) (POS-030(P)).	n the Attachment to Proof of Service
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 OF PERSON COMPLETING THIS FORM) (SIGNATI	JRE OF PERSON COMPLETING THIS FORM)

INFORMATION SHEET FOR PROOF OF SERVICE BY FIRST-CLASS MAIL—CIVIL

(This information sheet is not part of the Proof of Service and does not need to be copied, served, or filed.)

NOTE: This form should **not** be used for proof of service of a summons and complaint. For that purpose, use *Proof of Service of Summons* (form POS-010).

Use these instructions to complete the *Proof of Service by First-Class Mail—Civil* (form POS-030).

A person over 18 years of age must serve the documents. There are two main ways to serve documents:

(1) by personal delivery and (2) by mail. Certain documents must be personally served. You must determine whether personal service is required for a document. Use the *Proof of Personal Service—Civil* (form POS-020) if the documents were personally served.

The person who served the documents by mail must complete a proof of service form for the documents served. **You cannot serve documents if you are a party to the action.**

INSTRUCTIONS FOR THE PERSON WHO SERVED THE DOCUMENTS

The proof of service should be printed or typed. If you have Internet access, a fillable version of the Proof of Service form is available at www.courtinfo.ca.gov/forms.

Complete the top section of the proof of service form as follows:

<u>First box, left side</u>: In this box print the name, address, and telephone number of the person *for* whom you served the documents.

<u>Second box, left side</u>: Print the name of the county in which the legal action is filed and the court's address in this box. The address for the court should be the same as on the documents that you served.

<u>Third box, left side</u>: Print the names of the Petitioner/Plaintiff and Respondent/Defendant in this box. Use the same names as are on the documents that you served.

First box, top of form, right side: Leave this box blank for the court's use.

<u>Second box, right side</u>: Print the case number in this box. The case number should be the same as the case number on the documents that you served.

Complete items 1-5 as follows:

- 1. You are stating that you are over the age of 18 and that you are not a party to this action. You are also stating that you either live in or are employed in the county where the mailing took place.
- 2. Print your home or business address.
- 3. Provide the date and place of the mailing and list the name of each document that you mailed. If you need more space to list the documents, check the box in item 3, complete the *Attachment to Proof of Service by First-Class Mail—Civil (Documents Served)* (form POS-030(D)), and attach it to form POS-030.
- 4. For item 4:

Check box a if you personally put the documents in the regular U.S. mail.

Check box b if you put the documents in the mail at your place of business.

5. Provide the name and address of each person to whom you mailed the documents. If you mailed the documents to more than one person, check the box in item 5, complete the *Attachment to Proof of Service by First-Class Mail—Civil (Persons Served)* (form POS-030(P)), and attach it to form POS-030.

At the bottom, fill in the date on which you signed the form, print your name, and sign the form. By signing, you are stating under penalty of perjury that all the information you have provided on form POS-030 is true and correct.

FW-001

Request to Waive Court Fees

Clerk stamps date here when form is filed.

you
der

If you are getting public benefits, are a low-income person, or do not have enough income to pay for your household's basic needs and your court fees, you may use this form to ask the court to waive your court fees. The court may order you to answer questions about your finances. If the court waives the fees, you may still have to pay later if: a

Fill in court name and street address:

• You cannot give the court proof of your eligibility,

Superior Court of California, County of

CONFIDENTIAL

· Your financial situation improves during this case, or

• You settle your civil case for \$10,000 or more. The trial court that waives your fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge you any collection costs.

	warred roos and cooler rise court may use of		my comecinem costs.	
1	Your Information (person asking the cou	rt to waive	the fees):	
	Name:			
	Street or mailing address:			Fill in case number and name:
	City:	_ State:	_, Zip:	Case Number:
	Phone:			Case Number.
(2)	Your Job, if you have one (job title):			<u> </u>
	Name of employer:			Case Name:
	Employer's address:			
	W I 'C 1 / 0	00.74	,	1 10 0

- Your Lawyer, if you have one (name, firm or affiliation, address, phone number, and State Bar number):
 - a. The lawyer has agreed to advance all or a portion of your fees or costs *(check one)*: Yes
 No
 b. *(If yes, your lawyer must sign here)* Lawyer's signature:

If your lawyer is not providing legal-aid type services based on your low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

4 What court's fees or costs are you asking to be waived?

Superior Court (See *Information Sheet on Waiver of Superior Court Fees and Costs* (form FW-001-INFO).)
 Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See *Information Sheet on Waiver of Appellate Court Fees* (form APP-015/FW-015-INFO).)

(5) Why are you asking the court to waive your court fees?

a.

I receive (check all that apply; see form FW-001-INFO for definitions):

SSP Medi-Cal County Relief/Gen. Assist.

IHSS CalWORKS or Tribal TANF CAPI

b. My gross monthly household income (before deductions for taxes) is less than the amount listed below. (If you check 5b, you must fill out 7, 8, and 9 on page 2 of this form.)

Family Size	Family Income	Family Size	Family Income	Family Size	Family Income	If more than 6 people
1	\$1,329.17	3	\$2,262.50	5	\$3,195.84	at home, a dd \$466.67
2	\$1,795.84	4	\$2,729.17	6	\$3,662.50	for each extra person.

c. I do not have enough income to pay for my household's basic needs and the court fees. I ask the court to: (check one and you must fill out page 2):

waive all court fees and costs waive some of the court fees let me make payments over time

Check here if you asked the court to waive your court fees for this case in the last six months.

(If your previous request is reasonably available, please attach it to this form and check here):

I declare under penalty of perjury under the laws of the State of California that the information I have provided on this form and all attachments is true and correct.

Date:

Sign here

Print your name here

Your name:							
If you checked 5a on page 1, do not fil If you checked 5c, you must fill out thi	s entire page. If	you need	d mor	e space, atta	ch form	MC-025 c	-
sheet of paper and write Financial Info	rmation and you					D.	
7 Check here if your income changes a lot from month to month. If it does, complete the form based on your average income for the past 12 months.		(10)		oney and Prope	erty		
			Cash				\$
·		b.		ancial accounts (L			unt):
Your Gross Monthly Income a. List the source and amount of <i>any</i> income you get each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability,							\$
				boats, and other			>
unemployment, military basic allowance for		0.		Make / Year	veriicies	Fair Market	How Much You
veterans payments, dividends, interest, trus net business or rental income, reimburseme					¢	Value	Still Owe \$
expenses, gambling or lottery winnings, etc.	•				\$		_ \$
(1)			(3)		\$		\$
(2)		d.	Real	estate		Fair Market	How Much You
(3)				Address		Value	Still Owe
(4)					\$		_\$
b. Your total monthly income:	\$		(2)		\$		\$
Household Income		e.		personal property	(jewelry, fu	ırniture, furs,	
a. List the income of all other persons living in	your home who		stocks	bonds, etc.):		Fair Market	How Much You
depend in whole or in part on you for suppor	t, or on whom you			Describe	¢.	Value	Still Owe
depend in whole or in part for support.	Gross Monthly		(2)				\$ \$
Name Age Relationship			(-/ _		*		Ψ
(1)				onthly Deduction			
(2)		a.	List an	y payroll deductio	ns and the	monthly amo	unt below:
(3)							
						\$_	
b. Total monthly income of persons above:	\$						
Total monthly income and household income (8b plus 9b):	\$	b.		or house payment		Ψ_ lance	
nouscitota mosmo (os piae ss).	<u> </u>			and household su			\$
		d.	Utilitie	es and telephone			\$
			Clothi	•			\$
				Iry and cleaning			\$ \$
		g. h		al and dental expanse (life, health, a			⊅ \$
		i.		ol, child care			\$
		j.	Child,	spousal support	(another m	arriage)	\$
		k.		portation, gas, au	-		\$
		I.		lment payments <i>(I</i> d to:	ist each be	elow):	
			(4)	u to.			\$
			4.00			5/.1-	\$
	. 1						\$
To list any other facts you want the court to k		m		s/earnings withhe			\$
unusual medical expenses, etc., attach form M				ther monthly expe			τ
attach a sheet of paper and write Financial Integration your name and case number at the top.	omation and			d to:	,	,	How Much?
Check here if you attach a	nother nave		(1)				\$
			(2)				\$
Important! If your financial situation or ab			(3)				\$
court fees improves, you must notify the codays on form FW-010.	urt within live	Total n	nonthl	y expenses (ad	ld 11a –1	1n above):	\$

Case Number:

FW-003	(Superior Court)	er	nk stamps date here when form is hied.
1 Person who ask	ked the court to waive court fees:		
Street or mailing a	address:		
City:	State: Zip:		
	on in (1) has one (name, firm name, and (1) and (1) state (1) (2) (3) (4) (4) (4) (4) (5) (5) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7)		to accust name and attent address.
			in court name and street address: perior Court of California, County of
A request to waive	a court face was filed on (data):	Fill i	in case number and name:
•	e court fees was filed on (date):		se Number:
The court mad	de a previous fee waiver order in this ca	se on (date):	
-		Ca	se Name:
Read this form carefu	ılly. All checked boxes 🗹 are court o	orders.	
to pay the fees. If you s amount of the waived for	thin five days. (Use form FW-010.) If yettle your civil case for \$10,000 or more ees. The trial court may not dismiss the	e, the trial court will he case until the lien is p	nave a lien on the settlement in the baid.
After reviewing you the court makes t	our:	Fees [] Reques	st to Waive Additional Court Fees
a. The court g	grants your request, as follows:		
	aiver. The court grants your request and of Court, rules 3.55 and 8.818.) You do	not have to pay the co	ourt fees for the following:
	pers in superior court		r phone hearing
	opies and certifying copies fee to give notice	_	ce and certificates pers to another court department
	s fee for attendance at hearing or trial, i		-
_	equest that the court provide an official		romeany recording the proceeding
-	ent for court investigations under Probat	-	1826, or 1851
	, certifying, copying, and sending the cl		-
_	n trust the deposit for a reporter's transc transcript or copy of an official electron		
_		_	
and co	Sonal Fee Waiver. The court grants you sts that are checked below. (Cal. Rules of items.)	-	-
	ury fees and expenses	Fees for a p	eace officer to testify in court
	Fees for court-appointed experts Other (specify):	Court-appo	inted interpreter fees for a witness

Your name:		
b. The	e court denies your fee waiver request because:	
	farning! If you miss the deadline below, the court cannot process your reques ou filed with your original request. If the papers were a notice of appeal, the ap	
(1)	Your request is incomplete. You have 10 days after the clerk gives a service on next page) to: • Pay your fees and costs, or • File a new revised request that includes the incomplete items list	,
(2)	The information you provided on the request shows that you are not requested for the reasons stated: Below On Attachment 4	•
	The court has enclosed a blank <i>Request for Hearing About Court Fe</i> (form FW-006). You have 10 days after the clerk gives notice of this • Pay your fees and costs in full or the amount listed in c below, • Ask for a hearing in order to show the court more information. <i>hearing.</i>)	s order (see date of service below) to: or
c. (1)	The court needs more information to decide whether to grant your redate on page 3. The hearing will be about the questions regarding your Below On Attachment 4c(1)	
(2)	Bring the items of proof to support your request, if reasonably available Below On Attachment 4c(2)	lable, that are listed:

Case Number:

This is a Court Order.

Your name:		Case Numb	er:
		Name and address of court	t if different from above:
Hearing > Date:	Time:		
Date Dept.:	Room:		
request to waive court fees,	and you will have 10 days t	court on your hearing date, the jet of pay your fees. If you miss that the papers were a notice of appe	t deadline, the court cannot
Date:			
	Signature of (che	eck one): Judicial Officer	Clerk, Deputy
	Request for Ac	commodations	
are available if you	ask at least five days before	real-time captioning, or sign land the hearing. Contact the clerk's and Response (form MC-41).	s office for Request for
	Clerk's Cer	tificate of Service	
certify that I am not involved in the	nis case and (check one):		
☐ I handed a copy of this Order to	the party and attorney, if a	ny, listed in 1 and 2, at the c	ourt, on the date below.
☐ This order was mailed first clas from (city): ☐ A certificate of mailing is:	s, postage paid, to the party, Californ attached.	and attorney, if any, at the addressia, on the date below.	esses listed in 1 and 2,
Date:			
	Clo	erk, by	, Deputy
		ma:	

This is a Court Order.