

# GRANDPARENT VISITATION (WITH FAMILY LAW CASE)

- > Self Help Info & Free Forms: <a href="www.courts.ca.gov/selfhelp">www.sb-court.org</a> (Court Website)
- > Email Assistance: <u>flworkshop@sb-court.org</u>

## Resource Center Services & Hours:

First Come, First Served . . . Arrive early!

MONDAYS 8:30am to 12:00pm & 1:00pm to 3:00pm (brief services only)

Brief Services Only - No Document Review - "5 Minute Family Law Clinic"

TUESDAYS to THURSDAYS 8:30am to 12:00pm & 1:00pm to 3:00pm Document review & all regular services

Demand for self help services may exceed staff availability on any given day. First Come, First Served... Arrive early!

### Locations:

- San Bernardino Historic Courthouse, 351 N. Arrowhead, Room 326
- Rancho Cucamonga Courthouse, 8303 Haven Avenue, Basement
- Victorville Courthouse, 14455 Civic Drive, Near V-10

For Government Child Support Cases: Child Support Courthouse, 655 W. 2<sup>nd</sup> Street, 2<sup>nd</sup> Floor, San Bernardino Hours: Monday to Thursday 8:30am – 12:00pm & 1:30pm to 4:00pm. Fridays – 8:00am to 12:00pm

Joshua Tree Services:  $2^{nd}$  &  $4^{th}$  Fridays of the month. 9:00am to 12:00pm & 1:00 pm to 3:00pm

SUPERIOR COURT OF CALIFORNIA COUNTY OF SAN BERNARDINO

Updated 2/1/2013
RESOURCE CENTER

## INSTRUCTIONS FOR PETITION FOR GRANDPARENT VISITATION

(Existing Case)

**Everyone**: Use the sample to fill out your forms in BLACK INK.

#### SAN BERNARDINO AND RANCHO CUCAMONGA COURTHOUSES:

- ♦ Copy:
  - Make 2 copies of your packet.
- ♦ File:
  - Take the original and your copies to the Clerk's Office/Family Law Window and file. At that time, the clerk will assign a date and time for your hearing.
  - You will have to pay a filing fee unless you have a fee waiver application

#### Serve:

- Someone else over the age of 18 must serve each of the child(ren)'s parents, any stepparent, and any person who has physical custody of the child.
- Service must be done by mailing a copy of the forms by certified mail, return receipt requested, postage prepaid, to the person's last known address, or to the attorneys of record of the parties to the existing family law case.
- Your server must fill out the Proof of Service.
- File the <u>completed Proof of Service</u> with the signed return receipts attached.

#### **VICTORVILLE AND JOSHUA TREE COURTHOUSES:**

- ♦ Resource Center Phone Call:
  - We will call the clerk's office to get a court date for you and write it on your Notice of Motion.
- ♦ Copy:
  - Make 2 copies of your packet.
- ♦ Serve:
  - Follow the service instructions above.
- File:
  - o Bring your original forms + 1 copy to the clerk's office to file.
  - You will have to pay filing fees unless you have a fee waiver
  - Be sure to bring your completed Proof of Service form with the signed return receipts attached.

<u>Everyone:</u> DEADLINE FOR MAILING: 16 "court days" before hearing plus 5 calendar days. You only count the days when the court is open. Never count Saturday or Sunday. If you do not want to figure it out, then get the mailing done at least 4 full weeks before the hearing date.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO (Ortional).	
TELEPHONE NO. (Optional): 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:	
MARRIAGE OF	
PETITIONER:	
RESPONDENT:	
CLAIMANT:	
	CASE NUMBER:
SUMMONS (JOINDER)	
NOTICE! You have been sued. The court may decide	;AVISO! Usted ha sido demandado. El tribunal puede
against you without your being heard unless you respond	•
within 30 days. Read the information below.	responda dentro de 30 dias. Lea la información que sigue.
If you wish to seek the advice of an attorney in this	Si Usted desea solicitar el consejo de un abogado en
matter, you should do so promptly so that your response or pleading, if any, may be filed on time.	este asunto, debería hacerlo inmediatamente, de esta manera, su respuesta o alegación, si hay alguna, puede ser
pleading, if any, may be filed on time.	registrada a tiempo.
1. TO THE PETITIONER RESPONDE	NT CLAIMANT
A pleading has been filed under an order joining (nar	
	ropriate pleading within <b>30</b> days of the date this summons is court may enter a judgment containing the relief requested in the
	e granted by the court, which could result in the garnishment of
wages, taking of money or property, or other relief.	
2. TO THE CLAIMANT EMPLOYEE BENEFIT PLAN	
A pleading on joinder has been filed under the clerk's	s order joining (name of employee benefit plan):
as a party claimant in this proceeding. If the employe	ee benefit plan fails to file an appropriate pleading within <b>30</b> days
	ay be entered and the court may enter a judgment containing the
relief requested.	
Dated: Cler	k, By, Deputy
3. NOTICE TO THE PERSON SE	, , ,
(SEAL) a. As an individual.	
b As (or on behalf of) the	ne person sued under the fictitious name of:
c. On behalf of:	
Under: CCP 416.10	(Corporation) CCR 416 60 (Minor)
	(Corporation) CCP 416.60 (Minor) (Defunct Corporation) CCP 416.70 (Incompetent)
	(Association or Partnership) CCP 416.90 (Individual)
Other:	FC 2062 (Employee
d. By personal delivery	Benefit Plan) on (date):
· · · · · · · · · · · · · · · · · · ·	Yage 1 of 2

**PROOF OF SERVICE—SUMMONS (JOINDER)** (Use separate proof of service for each person served)

1.	I served th	ne			
	(2) (4) (5) (5)	yee Benefit Plan, blank Notice of Ap Notice of Motion and Declaration Pleading on Joinder (specify title Other:	opearance and Re of for Joinder (3)		der-
	c. By serv	me of party or claimant): ring (1) Party or claimant.	(2) Othe	er (name and title or relationship to person	served):
	d E	By delivery at home Time of:	business (3) Address:	(1) Date of:	
2		By mailing (1) Date of:  If service: (check proper box)		(2) Place of:	
۷.	a.	<b>Personal service.</b> By personally d	alivarina aaniaa	(CCP 415 10)	
	b	Substituted service on corporati leaving, during usual office hours, of	on, unincorpora	ted association (including partnership) e of the person served with the person wh repaid) copies to the person served at the	o apparently was in charge
	c	Substituted service on natural pusual place of abode, or usual place household or a person apparently of the general nature of the papers	ce of business of the one of the	competent, or candidate. By leaving copi the person served in the presence of a cor ffice or place of business, at least 18 years nailing (by first-class mail, postage prepaid P 415.20(b)) (Attach separate declaration at attempting personal service.)	npetent member of the s of age, who was informed l) copies to the person
	d		d acknowledgme	rirst-class mail or airmail) copies to the pent and a return envelope, postage prepaid, at of receipt.)	
	e	Certified or registered mail servi	<b>ce.</b> By mailing to rson served. (CC	address outside California (by registered of P 415.40) (Attach signed return receipt	
	f	Other (specify code section):  Additional page is attached.	·		
3.	The notice	e to the person served (item 3 on the	e copy of the sum	nmons served) was completed as follows (	CCP 412.30, 415.10, and
	a.	As an individual.			
	b.	As the person sued under the fictition	ous name of		
	c.	On behalf of:	odo namo on		
		Under: CCP 416.10 (Corpora	·	CCP 416.60 (Minor)	
		CCP 416.20 (Defunction		CCP 416.70 (Incompetent)	
		CCP 416.40 (Associa		CCP 416.90 (Individual)	
	. 5	partners	nip)	FC 2062 (Employee Benefit Plan)	
		rsonal delivery on (date):			
		ne of service I was at least 18 years	of age and not a	party to this action.	
		ervice: \$			
6.	Person se	<del>-</del>		e. Name, address, telephone number, a	nd if
	b   c	Not a registered California process s Registered California process serve Exempt from registration under Bus. Code 22350(b).	r.	applicable, county of registration and	
	d	California sheriff, marshal, or consta	ıble.		
		under penalty of perjury that the fore ect and that this declaration is exect a		(For California sheriff, marshal, or constal I certify that the foregoing is true and countries this certificate is executed on (date):	= :
1	,		California.	at (place):	, California.

(Signature)

(Signature)

			FL-3/I
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):		FOR COURT USE ONLY	
_			
TELEPHONE NO.: FAX NO. (Optional):			
E-MAIL ADDRESS (Optional):			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		4	
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
MARRIAGE OF		1	
PETITIONER:			
TETHIONET.			
RESPONDENT:			
		CASE NUMBER:	
NOTICE OF MOTION AND DECLARATION FO	OR JOINDER		
NOTIC	E OF MOTION		
1. TO Petitioner Respondent			
2. A hearing on this motion for joinder will be held as follows:			
a. Date: Time:	Dept.:	Rm.:	
a. 24.6.			
b. The address of court: is shown above is:			
5. The address of coard			
c. Petitioner Respondent Claimant	will apply to this court	for an order joining claimant as a p	arty to this
<del></del>	proceeding on the gro	unds set forth in the Declaration be	elow.
3. The pleading on joinder accompanies this notice of motion.			
Dated:			
	<b>L</b>		
	<u> </u>		
(TYPE OR PRINT NAME)		(SIGNATURE)	
DECLARAT	TION FOR JOINDER		
4. The name of the name to be introduced			
4. The name of the person to be joined is:			
5. Facts showing that each person sought or seeking to be joine	ad noccaseas or controls o	or claims to own any proporty subje	act to
disposition by this court, or that such person has or claims cu	stody, physical control or	visitation rights with respect to any	/ minor
	,,,,,,,,,,		

#### Page 1 of 2

child of the marriage, are (specify):

PETITIONER:	CASE NUMBER:
RESPONDENT:	
6. Facts showing that it would be appropriate for this court to determine the particular issue	e in the proceedings are:
7. Facts showing that each person sought or seeking to be joined is either indispensable to or necessary to the enforcement of any judgment rendered on the issue are:	o a determination of the particular issue
I declare under penalty of perjury under the laws of the State of California that the forego	oing is true and correct.
Data	
Date: ▲	
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)
	,

Attorne	y or Party Without An Attorney (N	lame, State	Bar No. & Address)	For Court Use Only
Telepho Attorne				
	r Court of California, County of Sa			
	ow District; 235 East Mountain View, ear District; 477 Summit Boulevard,			
	a Tree District; 6527 White Feather les District, 1111 Bailey Avenue, Nee			
Ranch	no Cucamonga District; 8303 N. Have	en Ave., Ran	cho Cucamonga, CA 91730	
	ernardino District; 351 N. Arrowhead ville District; 14455 Civic Drive, Suite			
Petition	er.			
Respon	dent:			CASE NUMBER
	PETITION FOR GRAN	DPARENT	VISITATION	OAGE NOMBER
1. 2.	Petitioner is the grandparent of the n		n) listed below. is the parent of the child(ren) I wish	to visit.
	My daughter		is the parent of the child(ren)I wish	to visit.
	Name of Child	Birthdate	Identify Person Living With	Other Parent's Name
			& County of Residence	
3.	The parents of the child(ren): (mar.			
	☐ are divorced. A Judgment for in	Dissolution o	f Marriage or Domestic Partnership wa County	is entered on the following date (State)
	Case No.	TI	County, he child(ren) have resided in San Bern	ardino County for the last 6
	months or more.	rce proceedi	ng in San Bernardino County, Case No	)
	are currently involved in a divorce proceeding in San Bernardino County, Case No have never been married nor in a registered domestic partnership.			
			is deceased and the child(ren) have n of the child(ren)).	ot been adopted (or if adopted,
	adoption was by stepparent or grandparent of the child(ren)).  are currently married or have a registered domestic partnership and one of the parents has been absent for more			
			owing the whereabouts of the absent plomestic partnership and the parents a	
	and apart on a permanent or in			5 - 5 / G - 5 P - 1 - 1 - 1 - 1
	00.44000			
	SB-11290	Petiti	on for Grandparent Visitation	Page <b>1</b> of <b>2</b>

10/12/11 optional use Family Code, Sections 3100 through 3104

Personal Service is required except when this Petition is filed in a dissolution, nullity, legal separation or exclusive custody case. That type of filing requires service by certified mail, return receipt to the last known address of the parents, stepparent, or person with physical custody of the child. (See Family Code §3104subsection (c), §3103subsection (c).)

	Case Number
the grandparent, as shown by the signature of are currently married or have a registered doparent.	omestic partnership and one of the parents joins in this petition with of the parent below.  omestic partnership and the child(ren) is not residing with either omestic partnership and the child(ren) has been adopted by a
	h child and the petitioner(s). Explain the reason why grandparent attachment
ne duration and frequency of visitation that is	being requested: See attachment
oleted Declaration under the Uniform Child Co no existing Family Law Case and this Petition	ustody Jurisdiction and Enforcement Act (Form FL-105) is attached, n shall start a new matter.
	sitation with the above-named child(ren), and such other relief as the Section 3100 through 3104.   A Request for Order is hearing date.
penalty of perjury under the laws of the S	State of California that the foregoing is true and correct.
r Print Name Here)	(Sign Name Here)
r Print Name Here)	(Sign Name Here)
NSENT to Petition for Grandparent Visitati ☐ Father hereby consents to and joins in this	
	the grandparent, as shown by the signature are currently married or have a registered do parent.  are currently married or have a registered do stepparent.  are currently married or have a registered do stepparent.  The relationship and the bonding between each in the best interest of each child:  See the duration and frequency of visitation that is colleted Declaration under the Uniform Child Cono existing Family Law Case and this Petition by requests that the court grant reasonable visiteem appropriate, pursuant to Family Code Sty filed with this Petition in order to request a penalty of perjury under the laws of the Start Name Here)  The Print Name Here Print Name Here  The Print Name Here Print Name Here  The Print Name Here  The Print Name Here

In the following circumstances, a rebuttable presumption against best interests/visitation is created:

- If the parents agree that visitation is not in the best interests of the child.
- If the parent awarded sole legal and physical custody (or the parent with whom the child resides if no custody order) objects.

	FL-333	
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY	
_		
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:	CASE NUMBER:	
DEODONDENT/DEFENDANT		
RESPONDENT/DEFENDANT:	(If applicable, provide):	
OTHER PARENT/PARTY:	HEARING DATE:	
DROOF OF SERVICE BY MAIL	HEARING TIME:	
PROOF OF SERVICE BY MAIL	DEPT.:	
NOTICE: To sorve temporary restraining orders you must use perso	nal sorvice (see form EL -220)	
NOTICE: To serve temporary restraining orders you must use perso	ilai service (see form FL-330).	
<ol> <li>I am at least 18 years of age, not a party to this action, and I am a resi place.</li> </ol>	dent of or employed in the county where the mailing took	
My residence or business address is:		
I served a copy of the following documents (specify):		
by analoging them in an anyelene AND		
by enclosing them in an envelope AND  a depositing the sealed envelope with the United States Postal Service with the postage fully prepaid.  b placing the envelope for collection and mailing on the date and at the place shown in item 4 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.		
	velope with postage rany propaid.	
<ol> <li>The envelope was addressed and mailed as follows:</li> <li>a. Name of person served:</li> </ol>		
b. Address:		
b. Address.		
c. Date mailed:		
d. Place of mailing (city and state):		
5. I served a request to modify a child custody, visitation, or child	support indement or permanent order which included on	
I served a request to modify a child custody, visitation, or child support judgment or permanent order which included an address verification declaration. (Declaration Regarding Address Verification—Postjudgment Request to Modify a Child Custody, Visitation, or Child Support Order (form FL-334) may be used for this purpose.)		
6. I declare under penalty of perjury under the laws of the State of California		
Date:		
(TYPE OR PRINT NAME)	(SIGNATURE OF PERSON COMPLETING THIS FORM) Page 1 of 1	