



# Request to Modify/Terminate CHRO Step 2 Packet

Sacramento Superior Court  
Civil Self-Help Services

Forms to serve on the other party AFTER you request  
a modification or termination of the permanent order.

The following form must be served on the other party and is included in this packet. You do not need to keep a copy of this form.

CH-620 Response to Request to Modify/Terminate CHRO

The forms you already filed with the court must also be served on the other person. If you are picking this packet up from the court, they will be attached at the end.

CH-600 Response to Request to Modify/Terminate CHRO

CH-610 Notice of Hearing on Request to Modify/Terminate CHRO

If you are the restrained person: Have the protected person **personally served** with the above forms. This is not a justification for you to violate the existing restraining order. Anyone who is over 18 can serve the protected person for you. They will complete the attached form below. More info on page 2.

CH-200 **Proof of Personal Service.**

If you are the protected person: Have the restrained person **served by mail** with the above forms. The Sheriff's Civil Bureau **will not** serve anything that can be served by mail. Anyone who is over 18 can mail the forms by first-class mail for you. The person mailing the documents will complete the attached form below. If you bring postage (stamps or pre-paid envelope), Civil Self-Help Services can do the service by mail, and fill out the Proof of Service by Mail (**CH-250**) for you.

CH-250 **Proof of Service by Mail.**

You must serve a copy of everything you filed with the court  
(including attachments) on the other person.

If you are the restrained person:

You are responsible for having the protected person (the person who filed the restraining order against you) personally served with a copy of everything listed on the front page **at least 5 court days before the hearing**. Any adult who is not protected by the order can personally hand the copies to the protected person. Service **cannot** be completed by certified mail.

Sacramento Sheriff's Civil Bureau: If the person lives in Sacramento County, you may have the Sacramento Sheriff's Civil Bureau serve them. You will need to have at least one (1) address where you think the person might be between the hours of 9:00 AM and 3:00 PM. The Sacramento Sheriff's Civil Bureau **will not** look up addresses for you.

The Sacramento Sheriff's Civil Bureau charges \$50.00 to serve, but that fee can be waived. The Court may order it waived with a Fee Waiver and Order (**FW-001 & FW-003**). See the **SER-001** Request for Sheriff to Serve Court Papers at the end of this packet for more instructions.

Online: You can submit requests for service to the Sheriff's Civil Bureau online. Find more information about this process at the e-SERVICES PORTAL: [civil.sacsheriff.com/Portal/](http://civil.sacsheriff.com/Portal/).

**In Person:** Public counter hours are Monday and Friday, 9:00 AM to 12:00 PM, Tuesday, Wednesday, and Thursday, 9:00 AM to 3:00 PM, excluding holidays. A drop box is available 8:00 AM to 5:00 PM in front of the Civil Bureau Office.

**Sacramento Sheriff's Civil Bureau**  
**2969 Prospect Park Drive, Suite 200 Rancho Cordova, CA 95670**

Kiosk: You may submit requests to serve to the Sheriff's Civil Bureau by using the kiosk in the lobby of the Civil Bureau office. The kiosk is available during public counter hours.

You must get your forms to the Sheriff's Civil Bureau a **minimum of 15 days prior to the last day for service**.

If you have questions about the above information,  
please contact the Sacramento Sheriff's Civil Bureau office:



(916) 875-2665



[sacsheriff.com/pages/civil\\_bureau.php](http://sacsheriff.com/pages/civil_bureau.php)

## Response to Request to

☐ Modify ☐ Terminate

## Civil Harassment Restraining Order

Use this form to respond to the *Request to Modify or Terminate Civil Harassment Restraining Order* (form CH-600).

- Fill out this form and then take it to the court clerk.
- Have someone age 18 or older—**not you**—mail a copy of this form and any attached pages to the other party at the address in (2) below. Use form CH-250, *Proof of Service of Response by Mail*.

Clerk stamps date here when form is filed.

**1 Party Filing Response**

a. Your Full Name: \_\_\_\_\_

b. ☐ Protected person ☐ Restrained person

Your Lawyer (if you have one for this case)

Name: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

Firm Name: \_\_\_\_\_

b. Your Address (If you have a lawyer, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, you may give a different mailing address instead. You do not have to give telephone, fax, or e-mail. Law enforcement officer, give agency information.)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**2 Other Party**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**3 Response**a. ☐ I agree to the ☐ Modification ☐ Termination of the order.b. ☐ I do not agree to the ☐ Modification ☐ Termination

(Specify why you disagree in item (4) on page 2.)

c. ☐ I agree to the following orders (specify below or in item (4) on page 2):

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Fill in court name and street address:

Superior Court of California, County of

Sacramento

720 9th Street, Room 102

Sacramento, CA 95814

Fill in case number:

Case Number:

The court will consider your response at the hearing. Write your hearing date, time, and place from form CH-610 item (3) here.

Hearing  
Date

→ Date: \_\_\_\_\_

Time: \_\_\_\_\_

Dept.: \_\_\_\_\_ Room: \_\_\_\_\_



4

☐ **Reasons I Do Not Agree to the** ☐ **Modification** ☐ **Termination**

- ☐ Check here if there is not enough space below for your answer. Put your complete answer on an attached sheet of paper and write "Attachment 4—Reasons I Disagree" as a title. You may use form MC-025, Attachment.

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☐ **Lawyer's Fees and Costs**

- a. ☐ I ask the court to order payment of my ☐ Lawyer's fees ☐ Court costs

The amounts requested are:

<u>Item</u>	<u>Amount</u>	<u>Item</u>	<u>Amount</u>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

- ☐ Check here if there are more items. Put the items and amounts on the attached sheet of paper or form MC-025 and write "Attachment 5—Lawyer's Fees and Costs" for a title.

- b. ☐ I ask the court to deny the request of the other party that I pay his or her lawyer's fees and costs.

Date: \_\_\_\_\_

\_\_\_\_\_  
Lawyer's name, if you have one



\_\_\_\_\_  
Lawyer's signature

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
Type or print your name



\_\_\_\_\_  
Sign your name

**To the Party Filing This Response:**

Have someone age 18 or older—**not you**—mail a copy of this completed form CH-620 to the other party or to the other party's lawyer, if any. This is called "service by mail." The person who serves the form by mail must fill out form CH-250, *Proof of Service of Response by Mail*. Have the person who did the mailing sign the original. Take the signed original proof-of-service form back to the court clerk or bring it with you to the hearing.

*Clerk stamps date here when form is filed.***1 Person Seeking Protection**

Name: \_\_\_\_\_

**2 Person From Whom Protection Is Sought**

Name: \_\_\_\_\_

**3 Notice to Server**

The server must:

- Be 18 years of age or older.
- Not be listed in items **1** or **3** of Form CH-100.
- Give a copy of all documents checked in **4** to the person in **2**. (You cannot send them by mail.) Then complete and sign this form and give or mail it to the person in **1**.

*Fill in court name and street address:***Superior Court of California, County of**  
Sacramento720 9th Street  
Sacramento, CA 95814*Court fills in case number when form is filed.***Case Number:****PROOF OF PERSONAL SERVICE****4** I gave the person in **2** a copy of the forms checked below:

- a. ☐ CH-109, *Notice of Court Hearing*
- b. ☐ CH-110, *Temporary Restraining Order*
- c. ☐ CH-100, *Request for Civil Harassment Restraining Orders*
- d. ☐ CH-120, *Response to Request for Civil Harassment Restraining Orders* (blank form)
- e. ☐ CH-120-INFO, *How Can I Respond to a Request for Civil Harassment Restraining Orders?*
- f. ☐ CH-130, *Civil Harassment Restraining Order After Hearing*
- g. ☐ CH-250, *Proof of Service by Mail* (blank form)
- h. ☐ CH-800, *Receipt for Firearms and Firearm Parts* (blank form)
- i. ☐ Other (specify): \_\_\_\_\_

**5** I personally gave copies of the documents checked above to the person in **2**:a. On (date): \_\_\_\_\_ b. At (time): \_\_\_\_\_ ☐ a.m. ☐ p.m.

c. At this address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**6 Server's Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

*(If you are a registered process server):*

County of registration: \_\_\_\_\_ Registration number: \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: \_\_\_\_\_

Type or print server's name

Server to sign here

Clerk stamps date here when form is filed.

**1 Name of Person Asking for Protection:****2 Name of Person to Be Restrained:****3 Notice to Server**

The server must:

- Be 18 years of age or over.
- Not be listed in items **1**, **2**, or **3** of form CH-100, *Request for Civil Harassment Restraining Orders*.
- Mail a copy of all documents checked in **4** to the person in **5**.

**4 I (the server) am 18 years of age or over and live in or am employed in the county where the mailing took place. I mailed a copy of all documents checked below to the person in **5**:**

- a. ☐ CH-120, *Response to Request for Civil Harassment Restraining Orders*
- b. ☐ CH-130, *Civil Harassment Restraining Order After Hearing*
- c. ☐ Other (specify): \_\_\_\_\_

**5 I placed copies of the documents checked above in a sealed envelope and mailed them as described below:**

- a. Name of person served: \_\_\_\_\_
- b. To this address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- c. Mailed on (date): \_\_\_\_\_
- d. Mailed from (city): \_\_\_\_\_ (state): \_\_\_\_\_

**6 Server's Information**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_

If you are a registered process server:

County of registration: \_\_\_\_\_ Registration number: \_\_\_\_\_

**7 I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.**

Date: \_\_\_\_\_

Type or print server's name

Server to sign here

Fill in court name and street address:

**Superior Court of California, County of Sacramento**720 9th Street  
Sacramento, CA 95814

Fill in case number:

**Case Number:**

**Instructions:** Each county in California has a sheriff (and sometimes a marshal's office) that can serve different types of court papers, including restraining orders. Note that the sheriff cannot guarantee that they will be successful in finding the person you need served, but they will try to serve based on the information you put on this form.

- Complete this form for each set of papers you need served. You must complete a separate form for each person you need served.
- Find out where the person you need served is located. Give your papers to the sheriff or marshal's office in that county.
- You may have to pay for service of some court papers. For more information, see page 5 of this form, or go to <https://selfhelp.courts.ca.gov/sheriff-serves>.
- Do not use this form if you are asking the sheriff to enforce a wage garnishment order on an employer. Instead, use forms WG-001, *Application for Earnings Withholding Order*, and WG-035, *Confidential Statement of Judgment Debtor's Social Security Number*.
- If you want the sheriff to enforce a writ or levy, complete this form and form SER-001A, *Special Instructions for Writs and Levies—Attachment*.

**CONFIDENTIAL****To Court Clerk: Do not file this form.****Sheriff File Number** (for sheriff to complete, if needed):

Fill in case number:

**Court Case Number:**

All information is required unless it is listed as optional or does not apply to your case.

**1 To the Sheriff or Marshal of (name of county):** \_\_\_\_\_

**2 Your Information**

a. Your name (party requesting service): \_\_\_\_\_

b. Your lawyer's information (if you have one)

Name: \_\_\_\_\_

Firm name: \_\_\_\_\_

c. Court case name: \_\_\_\_\_

(example: *Garcia v. Smith*)

d. Contact information for the sheriff or marshal to reach you

(Give an address where you can receive mail regularly, like a post office box, a Safe at Home address, or another safe address. If you have a lawyer, give the lawyer's information.)

Address to receive mail: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone number (optional): \_\_\_\_\_ Email address (optional): \_\_\_\_\_

**CONFIDENTIAL****This is not a court form. Do not file with the court.**

**3 Information About Person or Entity You Want Served**

(Check a or b)

- a.
- ☐
- I ask the sheriff to serve a person (complete section below)

(1) Name of person: \_\_\_\_\_  
Nicknames or aliases (optional): \_\_\_\_\_

(2) Telephone number (optional): \_\_\_\_\_

(3) Can you describe the person?

☐ No, I do not have any information about the person's description.☐ Yes (complete the section below with any information you have):Gender: ☐ Male ☐ Female ☐ Nonbinary

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair color: \_\_\_\_\_ Eye color: \_\_\_\_\_

Date of birth or age (give estimate, if unknown): \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Special marks or features (tattoos, scars, etc.): \_\_\_\_\_

Vehicle (type, model, year, color, plate number): \_\_\_\_\_

☐ Check here if you are including a picture of the person.

(4) Do you know of any safety or accessibility issues?

☐ No☐ Yes (complete the section below with any information you have):

The person (check all that apply):

☐ Has a gun or other weapon.☐ Is on probation or parole.☐ Has a history of violence or abuse.☐ Has an aggressive animal.☐ Has special training (examples: military, first responder).☐ Has mental health issues.☐ Is deaf or hard of hearing.☐ Does not speak English (list language): \_\_\_\_\_☐ Add any other information about safety or accessibility that you know about: \_\_\_\_\_

- b.
- ☐
- I ask the sheriff to serve an entity (examples: business or government agency)

(1) Name and type of entity: \_\_\_\_\_

Telephone number (optional): \_\_\_\_\_

(2) If there is a specific person who should be served, give name: \_\_\_\_\_

(3) If there is an agent for service of process, give name: \_\_\_\_\_

(4) List any safety or accessibility issues (examples: weapons, aggressive animals, language barrier): \_\_\_\_\_

**CONFIDENTIAL****This is not a court form. Do not file with the court.**

**4 Address Where Person or Entity Should Be Served**

*(The sheriff typically serves during normal business hours. Check with the sheriff's office for the exact times.)*

Address: \_\_\_\_\_ ☐ Home ☐ Business

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Gate code or special instructions: \_\_\_\_\_

Best time to serve at this address *(example: 8 a.m.–noon)*: \_\_\_\_\_

☐ Check here if the person is in jail or prison *(give name of facility)*: \_\_\_\_\_

Alternate address *(optional)*

*(If the person cannot be found at the address listed above, some sheriffs may try a second address if it's in the same county. If you have a second address for the person you want served, complete the section below.)*

Address: \_\_\_\_\_ ☐ Home ☐ Business

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Gate code or special instructions: \_\_\_\_\_

Best time to serve at this address *(example: 8 a.m.–noon)*: \_\_\_\_\_

**5 Information About Your Request**

- a. What type of court papers are you giving the sheriff to serve *(examples: summons, restraining order, eviction, small claims, bank levy, or writ of attachment)*?

\_\_\_\_\_

- b. List all forms or court papers you want served on the person in **(3)** a. *(optional)*.

*(Note: You can list each form by its form number (example: FL-100, SC-100). If there is no form number, give the title of the document. The court may have ordered you to serve certain papers. Look at the court's order and list all forms required. If you do not know which papers you need to serve, ask a lawyer, or contact your local self-help center for free information.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- c. Is there a court hearing (court date)?

☐ I don't know

☐ No

☐ Yes *(if yes, give date of hearing)*: \_\_\_\_\_

**CONFIDENTIAL**

**This is not a court form. Do not file with the court.**



- 5 d. Is there a deadline for service?
- ☐ I don't know
- ☐ No
- ☐ Yes (if yes, give deadline): \_\_\_\_\_
- e. Has the court allowed you to serve your court papers in another way besides personal service (example: substituted service)?
- ☐ I don't know
- ☐ No
- ☐ Yes (if yes, include a copy of the order allowing another type of service)
- f. Is there any other information you want or need to give to the sheriff to serve your court papers?
- ☐ No
- ☐ Yes (if yes, give information below):

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## 6 Enforcement of Writ or Levy

If you want the sheriff to enforce a writ or levy, you must complete form SER-001A, *Special Instructions for Writs and Levies—Attachment*, and turn it in with this form.

(Only complete this section if you want the sheriff to enforce a writ or levy.)

Do you want the sheriff to both serve your court papers and act as levying officer?

- ☐ Yes
- ☐ No. I only want the sheriff to act as levying officer. A registered process server has or will serve my papers.

**Your Signature** (party asking for service, or their lawyer)

Date: \_\_\_\_\_

\_\_\_\_\_  
Type or print your name



\_\_\_\_\_  
Sign your name (may be electronic)

**CONFIDENTIAL**

**This is not a court form. Do not file with the court.**



## Your Next Steps

- Find out if you need to pay a fee for service by asking the court's self-help center, a lawyer, or the sheriff's office. Here are some situations where you **do not** need to pay for service:
  - If you have a fee waiver in your case (fee waiver granted by a judge on form FW-003 or FW-005).
  - If you are serving a domestic violence, elder abuse, or gun violence restraining order.
  - If you have a civil harassment, workplace violence, or school violence restraining order based on a credible threat of violence or stalking.
- Give this form and a copy of all the court papers you need served to the sheriff or marshal, including a copy of a fee waiver (if you have one). If you do not have to pay a fee to the sheriff, you can send your papers electronically. If you have to pay a fee, contact the sheriff to find out your options for turning in your request. Note that you can always turn in your request in person.
- You should get a form back from the sheriff.
  - If the sheriff was able to serve your court papers, you should receive a form (called a proof of service). **Make sure you get a copy from the sheriff and file it with the court.** Note that if there is a court stamp at the top right corner of the first page, it has already been filed and you do not need to file it with the court.
  - If the sheriff was unable to serve your court papers, you should receive a form (sometimes called declaration of due diligence) that tells you that service was unsuccessful and will give details about when the sheriff tried to serve the person. If the sheriff was unable to serve your papers, you can ask a lawyer or court's self-help center about your next steps.
- To find your local court self-help center, go to [www.courts.ca.gov/selfhelp](http://www.courts.ca.gov/selfhelp). Self-help center staff will not act as your lawyer but may be able to give you information to help you decide what to do in your case. Services are free.

### To Sheriff or Marshal

- This form is confidential and must not be made public.
- Any papers submitted with this form should be served and listed on the applicable proof of service form.
- Note that (5) b is optional and may help to identify documents that should have been submitted but were not received by your office.
- Under Government Code section 26666.2, once you've received a completed copy of this form and forms for service, you must attempt service unless:
  - Any order submitted does not have a judge's signature or other representation of a judge's signature; clerk's endorsement; or court stamp, seal, or other court endorsement; or
  - A court case number is not listed on the order, summons, or other notice.

**CONFIDENTIAL**

**This is not a court form. Do not file with the court.**