

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MADERA <input type="checkbox"/> Madera - 209 West Yosemite Avenue, Madera, California 93637 <input type="checkbox"/> Sierra - 40601 Road 274, Bass Lake, CA 93604	
PLAINTIFF/PETITIONER: _____	
DEFENDANT/RESPONDENT: _____	
EX-PARTE DECLARATION	CASE NUMBER: _____

- I, _____, DECLARE,
1. I AM _____ PARTY IN THIS ACTION
 2. PURSUANT TO RULE 2.4.6 OF THE LOCAL RULE OF COURT I HAVE INFORMED _____, OF THIS EX-PARTE APPLICATION REQUESTED BY _____ .[COMPLETE A, B OR C below]
 - A. TELEPHONE ON _____ AT _____ A.M./P.M.
 - B. IN PERSON ON _____ AT _____ A.M./P.M.
 - C. OTHER _____
 3. I TOLD _____ THAT _____ WOULD BE BRINGING AN EX-PARTE REQUEST ON _____ AT 8:00 A.M. IN DEPARTMENT _____ OF THE MADERA SUPERIOR COURT. THAT HE/SHE WILL HAVE TO COME TO COURT AT THAT TIME IF HE/SHE OBJECTS TO THIS EX PARTE REQUEST.
 4. a. I HAVE NOT GIVEN NOTICE OF THIS APPLICATION FOR EX PARTE ORDER FOR THE FOLLOWING REASON(S): _____
 - b. GIVING NOTICE WOULD FRUSTRATE THE PURPOSE OF THE ORDER (EXPLAIN IN DETAIL AS TO WHY NOTICE IS NOT GIVEN): _____
 5. I WILL SUFFER IMMEDIATE AND IRREPARABLE INJURY IF NOTICE IS GIVEN (EXPLAIN IN DETAIL AS TO WHY YOU FEAR GIVING NOTICE); _____

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)

(Signature of Applicant)