	CH-700 Request to Renew Res Order	Clerk stamps date here when form is filed.
1	Protected Person	
\bigcirc	a. Your Full Name:	
	Your Lawyer (if you have one for this case):	
	Name:State Ba	ır No.:
	Firm Name:	
	b. Your Address (If you have a lawyer, give your lawy	ver's information.
	If you do not have a lawyer and want to keep your is private, you may give a different mailing address in have to give telephone, fax, or e-mail.)	
	Address:	
	City: State:	Zip:
	Telephone: Fax:	Court fills in case number when form is filed.
	E-Mail Address:	
2	Restrained Person	
	Full Name: Address (if known):	
	City: State: Zip:	
3	 Request to Renew Restraining Order I ask the court to renew the <i>Civil Harassment Restraining Order After Hearing</i> (form CH-130). A copy of the order is attached. a. The order ends on (<i>date</i>):	
I dec Date		of California that the information above is true and correct.
Type	or print your name	Sign your name

This is not a Court Order.

Request to Renew Restraining Order (Civil Harassment Prevention)