



**SUPERIOR COURT OF CALIFORNIA  
COUNTY OF ORANGE  
SELF-HELP CENTER  
[www.occourts.org](http://www.occourts.org)**

**PETITION FOR GRANDPARENT VISITATION**

**All documents must be typed or printed neatly.  
Please use black ink.**

**Self-Help Center Locations:**

Lamoreaux Justice Center  
1<sup>st</sup> Floor  
341 The City Drive  
Orange, CA  
☞ ☛

Central Justice Center  
Room G-100  
700 Civic Center Drive  
Santa Ana, CA  
☞ ☛

Superior Court Service  
Center  
27573 Puerta Real  
Mission Viejo, California,  
92691

Harbor Justice Center  
Room 150  
4601 Jamboree Rd  
Newport Beach, CA

North Justice Center  
Room 360  
1275 N. Berkeley Ave.  
Fullerton, CA

ATTORNEY (Name & Address):   TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____ BAR NO.: _____	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b> JUSTICE CENTER: <input type="checkbox"/> Lamoreaux – 341 The City Drive, Orange, CA 92868-3205 <input type="checkbox"/> Central – 700 Civic Center Drive West, Santa Ana, CA 92701	
PETITIONER:  RESPONDENT:	
<b>PETITION FOR GRANDPARENT VISITATION</b>	CASE NUMBER: _____

1. Petitioner's relationship to minor child(ren) listed below:

- grandmother       grandfather  
 my son (name) \_\_\_\_\_ is the parent of the child(ren).  
 my daughter (name) \_\_\_\_\_ is the parent of the child(ren).

<u>Child's name</u>	<u>Birthdate</u>	<u>Currently living with (relationship) / in (county)</u>	<u>Other Parent's Name</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. The parents of the child(ren) (mark all boxes and complete all spaces which apply):

- a.  are currently married or have a domestic partnership and living together.
- b.  are divorced. A Judgment for Dissolution of Marriage or Domestic Partnership was entered on:  
 (specify date) \_\_\_\_\_, in \_\_\_\_\_ County, (state) \_\_\_\_\_  
 Case No. \_\_\_\_\_.
- c.  are currently involved in a divorce proceeding in \_\_\_\_\_ County, Case No. \_\_\_\_\_.
- d.  are currently married or have a domestic partnership and one of the parents has been absent for more than one month without the other parent knowing the whereabouts of the absent parent.
- e.  have never been married or in a domestic partnership.
- f.  are currently living separate and apart on a permanent or indefinite basis.
- g.  The  mother  father of the minor child(ren) is deceased.
- h.  The child(ren) is/are not residing with either parent.
- i.  The child(ren) has/have been adopted by a  stepparent  grandparent  other (specify relationship and name): \_\_\_\_\_.

CASE NAME:	CASE NUMBER:
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3. Describe the relationship between each child and the petitioner(s). Explain the reason why grandparent visitation is in the best interest of each child:

continued in attached declaration.

4. Describe the duration and frequency of visitation that is being requested:

continued in attached declaration.

5.  A completed declaration under the Uniform Child Custody Jurisdiction and Enforcement Act, form FL-105, is attached. (Not required if the Petition is filed within an open Family Law Case.)

6. Petitioner(s) requests that the court grant reasonable visitation with the above named child(ren), and such other relief as the court may deem appropriate, pursuant to Family Code sections 3100, 3102, 3103 and 3104.

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 PETITIONER)

\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF PETITIONER)

**PARENT CONSENT TO PETITIONER'S REQUEST FOR GRANDPARENT VISITATION**

Mother  Father hereby consents to and joins in this petition for Grandparent Visitation.

Date:

\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF PARENT OF MINOR CHILD(REN))

**SUMMONS  
(CITACION JUDICIAL)**

FOR COURT USE ONLY  
(SOLO PARA USO DE LA CORTE)

**NOTICE TO DEFENDANT:  
(AVISO AL DEMANDADO):**

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

**NOTICE!** You have been sued. The court may decide against you without your being heard unless you respond within 30 days. Read the information below.

You have 30 CALENDAR DAYS 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. A letter or phone call will not protect you. Your written response must be in proper legal form if you want the court to hear your case. There may be a court form that you can use for your response. You can find these court forms and more information at the California Courts Online Self-Help Center ([www.courtinfo.ca.gov/selfhelp](http://www.courtinfo.ca.gov/selfhelp)), your county law library, or the courthouse nearest you. If you cannot pay the filing fee, ask the court clerk for a fee waiver form. If you do not file your response on time, you may lose the case by default, and your wages, money, and property may be taken without further warning from the court.

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 Web site ([www.lawhelpcalifornia.org](http://www.lawhelpcalifornia.org)), the California Courts Online Self-Help Center ([www.courtinfo.ca.gov/selfhelp](http://www.courtinfo.ca.gov/selfhelp)), or by contacting your local court or county bar association. **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. **¡AVISO!** Lo han demandado. Si no responde dentro de 30 días, la corte puede decidir en su contra sin escuchar su versión. Lea la información a continuación.

Tiene 30 DÍAS DE CALENDARIO después de que le entreguen esta citación y papeles legales para presentar una respuesta por escrito en esta corte y hacer que se entregue una copia al demandante. Una carta o una llamada telefónica no lo protegen. Su respuesta por escrito tiene que estar en formato legal correcto si desea que procesen su caso en la corte. Es posible que haya un formulario que usted pueda usar para su respuesta. Puede encontrar estos formularios de la corte y más información en el Centro de Ayuda de las Cortes de California ([www.sucorte.ca.gov](http://www.sucorte.ca.gov)), en la biblioteca de leyes de su condado o en la corte que le quede más cerca. 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. Si no presenta su respuesta a tiempo, puede perder el caso por incumplimiento y la corte le podrá quitar su sueldo, dinero y bienes sin más advertencia.

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](http://www.lawhelpcalifornia.org)), en el Centro de Ayuda de las Cortes de California, ([www.sucorte.ca.gov](http://www.sucorte.ca.gov)) o poniéndose en contacto con la corte o el colegio de abogados locales. **AVISO:** Por ley, la corte tiene derecho a reclamar las cuotas y los costos exentos por imponer un gravamen sobre cualquier recuperación de \$10,000 ó más de valor recibida mediante un acuerdo o una concesión de arbitraje en un caso de derecho civil. Tiene que pagar el gravamen de la corte antes de que la corte pueda desechar el caso.

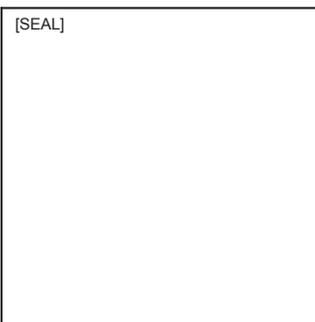
The name and address of the court is:  
(El nombre y dirección de la corte es): **LAMOREAUX JUSTICE CENTER**  
**341 The City Drive**  
**Orange, CA 92868**

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):

DATE: \_\_\_\_\_ Clerk, by \_\_\_\_\_, Deputy  
(Fecha) (Secretario) (Adjunto)

(For proof of service of this summons, use Proof of Service of Summons (form POS-010).)  
(Para prueba de entrega de esta citación use el formulario Proof of Service of Summons, (POS-010)).



**NOTICE TO THE PERSON SERVED:** You are served

1.  as an individual defendant.
2.  as the person sued under the fictitious name of (specify):
3.  on behalf of (specify):
 

under: <input type="checkbox"/> CCP 416.10 (corporation)	<input type="checkbox"/> CCP 416.60 (minor)
<input type="checkbox"/> CCP 416.20 (defunct corporation)	<input type="checkbox"/> CCP 416.70 (conservatee)
<input type="checkbox"/> CCP 416.40 (association or partnership)	<input type="checkbox"/> CCP 416.90 (authorized person)
<input type="checkbox"/> other (specify):	
4.  by personal delivery on (date):

PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:
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**DECLARATION**

*(This form must be attached to another form or court paper before it can be filed in court.)*

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 DECLARANT)

- Attorney for     Plaintiff     Petitioner     Defendant
- Respondent     Other (*Specify*):

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i>  _____  TELEPHONE NO.: _____ FAX NO. <i>(Optional)</i> : _____ E-MAIL ADDRESS <i>(Optional)</i> : _____ ATTORNEY FOR <i>(Name)</i> : _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b>	
STREET ADDRESS: 341 The City Drive MAILING ADDRESS: Post Office Box 14710 CITY AND ZIP CODE: Orange, California 92868-1570 BRANCH NAME: LAMOREAUX JUSTICE CENTER	
PETITIONER: _____ <i>(This section applies only to family law cases.)</i> RESPONDENT: _____ OTHER PARTY: _____	
<i>(This section applies only to guardianship cases.)</i>	
GUARDIANSHIP OF <i>(Name)</i> : _____	CASE NUMBER: _____
<b>DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)</b>	

1. I am a party to this proceeding to determine custody of a child.
2.  My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are *(specify number)*: \_\_\_\_\_ minor children who are subject to this proceeding, as follows:  
***(Insert the information requested below. The residence information must be given for the last FIVE years.)***

a. Child's name	Place of birth	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with <i>(name and complete current address)</i> <input type="checkbox"/> Confidential	Relationship
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
b. Child's name	Place of birth	Date of birth	Sex
<input type="checkbox"/> Residence information is the same as given above for child a. <i>(If NOT the same, provide the information below.)</i>			
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with <i>(name and complete current address)</i> <input type="checkbox"/> Confidential	Relationship
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	

- c.  Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d.  Additional children are listed on form FL-105(A)/GC-120(A). *(Provide all requested information for additional children.)*

SHORT TITLE: _____	CASE NUMBER: _____
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4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?

Yes  No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court <i>(name, state, location)</i>	Court order or judgment <i>(date)</i>	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court <i>(name, state, location)</i>
d. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency		
e. <input type="checkbox"/> Adoption		

5.  One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number <i>(if known)</i>	Orders expire <i>(date)</i>
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case?  Yes  No (If yes, provide the following information):

a. Name and address of person  <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights  Name of each child	b. Name and address of person  <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights  Name of each child	c. Name and address of person  <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights  Name of each child
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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 DECLARANT)

7.  Number of pages attached: \_\_\_\_\_

**NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.**

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name &amp; Address</i> ):  TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR ( <i>Name</i> ): _____ BAR NO.: _____	<i>FOR COURT USE ONLY</i>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b> JUSTICE CENTER: <input type="checkbox"/> Central - 700 Civic Center Dr. West, Santa Ana, CA 92701-4045 <input type="checkbox"/> Lamoreaux - 341 The City Drive, Orange, CA 92868-3205	
PLAINTIFF/PETITIONER:  DEFENDANT/RESPONDENT:	
<b>FAMILY LAW NOTICE RE RELATED CASE</b>	CASE NUMBER: _____

The parties must file this form with the Superior Court of Orange County, when a family law case is filed with the Court and when a party discovers that there is a related case. **A related case means one or both parties and/or minor children of the parties are involved in other cases.** Examples of related cases include another family law case, a domestic violence case, a child support collection case, a criminal case, and a juvenile case involving a minor child of one or both of the parties.

Fill in the requested information:

1. I also used the name(s): \_\_\_\_\_  
 \_\_\_\_\_

2. The other party's name is: \_\_\_\_\_;  
 He/She has also used the name(s): \_\_\_\_\_  
 \_\_\_\_\_

3.  Other court cases involving either party or a child of either party:  
 (If known, please include the case numbers)

	Case Number	Case Name	Court Location/ Justice Center	Person Involved
a.				
b.				
c.				
d.				

4.  There are no other court cases involving either party or a child of either party.

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

\_\_\_\_\_  
 (TYPE OR PRINT NAME OF PARTY OR ATTORNEY)

\_\_\_\_\_  
 (SIGNATURE OF PARTY OR ATTORNEY)

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i>  TELEPHONE NO.: _____ FAX NO. <i>(Optional)</i> : _____ E-MAIL ADDRESS <i>(Optional)</i> : _____ ATTORNEY FOR <i>(Name)</i> : _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF/PETITIONER:  DEFENDANT/RESPONDENT:	CASE NUMBER:
<b>PROOF OF SERVICE OF SUMMONS</b>	Ref. No. or File No.:

*(Separate proof of service is required for each party served.)*

1. At the time of service I was at least 18 years of age and not a party to this action.
2. I served copies of:
  - a.  summons
  - b.  complaint
  - c.  Alternative Dispute Resolution (ADR) package
  - d.  Civil Case Cover Sheet *(served in complex cases only)*
  - e.  cross-complaint
  - f.  other *(specify documents):*

**Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (FL-105); Family Law Notice re Related Case**

3. a. Party served *(specify name of party as shown on documents served):*
  
- b.  Person (other than the party in item 3a) served on behalf of an entity or as an authorized agent (and not a person under item 5b on whom substituted service was made) *(specify name and relationship to the party named in item 3a):*
  
4. Address where the party was served:
  
5. I served the party *(check proper box)*
  - a.  **by personal service.** I personally delivered the documents listed in item 2 to the party or person authorized to receive service of process for the party (1) on *(date)*: \_\_\_\_\_ (2) at *(time)*: \_\_\_\_\_
  - b.  **by substituted service.** On *(date)*: \_\_\_\_\_ at *(time)*: \_\_\_\_\_ I left the documents listed in item 2 with or in the presence of *(name and title or relationship to person indicated in item 3)*:

- (1)  **(business)** a person at least 18 years of age apparently in charge at the office or usual place of business of the person to be served. I informed him or her of the general nature of the papers.
- (2)  **(home)** a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the party. I informed him or her of the general nature of the papers.
- (3)  **(physical address unknown)** a person at least 18 years of age apparently in charge at the usual mailing address of the person to be served, other than a United States Postal Service post office box. I informed him or her of the general nature of the papers.
- (4)  I thereafter mailed (by first-class, postage prepaid) copies of the documents to the person to be served at the place where the copies were left (Code Civ. Proc., § 415.20). I mailed the documents on *(date)*: \_\_\_\_\_ from *(city)*: \_\_\_\_\_ or  a declaration of mailing is attached.
- (5)  I attach a **declaration of diligence** stating actions taken first to attempt personal service.

PLAINTIFF/PETITIONER:  DEFENDANT/RESPONDENT:	CASE NUMBER:
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5. c.  **by mail and acknowledgment of receipt of service.** I mailed the documents listed in item 2 to the party, to the address shown in item 4, by first-class mail, postage prepaid,
- (1) on *(date)*: \_\_\_\_\_ (2) from *(city)*: \_\_\_\_\_
- (3)  with two copies of the *Notice and Acknowledgment of Receipt* and a postage-paid return envelope addressed to me. (*Attach completed Notice and Acknowledgement of Receipt.*) (Code Civ. Proc., § 415.30.)
- (4)  to an address outside California with return receipt requested. (Code Civ. Proc., § 415.40.)
- d.  **by other means** (*specify means of service and authorizing code section*):

Additional page describing service is attached.

6. The "Notice to the Person Served" (on the summons) was completed as follows:

- a.  as an individual defendant.
- b.  as the person sued under the fictitious name of (*specify*):
- c.  as occupant.
- d.  On behalf of (*specify*):

under the following Code of Civil Procedure section:

- |   |   |
|---|---|
| <input type="checkbox"/> 416.10 (corporation)                     | <input type="checkbox"/> 415.95 (business organization, form unknown) |
| <input type="checkbox"/> 416.20 (defunct corporation)             | <input type="checkbox"/> 416.60 (minor)                               |
| <input type="checkbox"/> 416.30 (joint stock company/association) | <input type="checkbox"/> 416.70 (ward or conservatee)                 |
| <input type="checkbox"/> 416.40 (association or partnership)      | <input type="checkbox"/> 416.90 (authorized person)                   |
| <input type="checkbox"/> 416.50 (public entity)                   | <input type="checkbox"/> 415.46 (occupant)                            |
|   | <input type="checkbox"/> other:                                       |

7. **Person who served papers**

- a. Name:
- b. Address:
- c. Telephone number:
- d. **The fee** for service was: \$
- e. I am:
- (1)  not a registered California process server.
- (2)  exempt from registration under Business and Professions Code section 22350(b).
- (3)  a registered California process server:
- (i)  owner  employee  independent contractor.
- (ii) Registration No.:
- (iii) County:

8.  **I declare** under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

or

9.  **I am a California sheriff or marshal and** I certify that the foregoing is true and correct.

Date:

\_\_\_\_\_  
(NAME OF PERSON WHO SERVED PAPERS/SHERIFF OR MARSHAL)

▶

\_\_\_\_\_  
(SIGNATURE)