Print Form

Name, Address, and Phone Number
Of Attorney or Self-Represented Party:

_____

_____

_____

_____

IN THE SUPEROR COURT OF THE STATE OF CALIFORNIA
IN AND FOR THE COUNTY OF PLACER

_____ Petitioner vs. _____ Respondent	Case No. _____ Dept _____ Family Law –Request for Default Setting

TO THE CLERK OF THE COURT:

I request that this case be set for a default hearing. The hearing is estimated to take:

☐ 15 minutes or less ☐ More than 15 minutes

DATE: _____ Signed: _____
☐ Attorney ☐ Party

FOR CLERK'S USE ONLY

Set for Hearing:

DATE: _____ TIME: _____ DEPT._____

☐ Notice mailed to party or attorney at address shown above on:

☐ Party waives service by mail.

☐ Party was provided a copy of this Request for Default Setting at the counter on:

_____/_____/20_____

_____
Deputy Clerk