

SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF PLACER

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number, and Address): TELEPHONE NO.: FAX NO.: EMAIL ADDRESS:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF PLACER <input type="checkbox"/> 10820 Justice Center Drive <input type="checkbox"/> 2501 N. Lake Blvd. P.O. Box 619072 P.O. Box 5669 Roseville, CA 95661-9072 Tahoe City, CA 96145	
PETITIONER: RESPONDENT:	
REQUEST FOR TELEPHONIC APPEARANCE (CIVIL)	CASE NUMBER: _____
TYPE OF HEARING: _____ DATE: _____ TIME: _____ DEPT: _____	

1. I am the petitioner petitioner's counsel respondent respondent's counsel Other: _____
2. I request the court to allow me to appear from the following telephone number: () _____
3. I request to appear telephonically for the following reason: _____
- _____
- _____

4. I understand that the court, in its discretion, may decide to terminate the telephone appearance if it determines during the hearing that I am not available at the calendar call or delay due to disruption, noise, misconduct, a communication problem, a technical problem, or other issue.
5. I understand the court may decide at any time to require a personal appearance and continue the hearing.
6. I assume the risks of cost, time, delay, repeated telephone calls, technical failure, a wrong number, and/or other issues that may arise out of this telephone appearance.
7. I understand that except as provided in California Rules of Court, rule 1.150, court proceedings shall not be photographed, recorded, or broadcast.

I have read the advisements of this form and all applicable Local Rules and I understand that the terms apply to me.

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

DATE:

_____ _____
 PRINTED NAME SIGNATURE

FOR COURT USE ONLY	
By Judicial Officer: The request is <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	
Date: _____	_____
	Judicial Officer