SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF SIERRA

PLAINTIFF/PETITIONER:	FOR COURT USE ONLY	
DEFENDANT/RESPONDENT:		
OTHER:		
REQUEST TO APPEAR IN PERSON AND ORDER THEREON		
FOR COURT MATTER SET ON DATE: TIME:	CASE NUMBER:	
1. I am the \square attorney for \square petitioner/plaintiff \square respondent/defendant \square other <i>(name)</i>	·	
2. The court matter referenced above is currently set to take place by telephone and/or vi	deo remote appearance (i.e. Zoom).	
3. I request I be allowed to appear in person before the court for the above referenced court matter as the designated date and time.		
4. Reason for requesting to appear in person:		
5. I notified all other parties by \Box fax, \Box email, \Box telephone of this request on/_		
I received the following response(s) from opposing counsel/party(ies)		
Party(ies) objecting, and reason(s) stated:		
ADVISEMENT REGARDING IN PERSON APPE	ARANCE	
 modify any terms and conditions which pertain to my in-person appearance at any a. Suspending any Court proceeding; b. Directing me to exit the Court premises; and/or c. Notifying appropriate authorities of any conduct which does not comply with the 2) I acknowledge and agree to adhere to all Sierra County Superior Court, County of S with respect to Covid-19, and, in particular, stopping the spread of Covid-19. 3) I will wear an approved face covering at all times I am inside the courthouse building Executive Order 2000-01 Effective September 18, 2020 on the Court's website at: y 4) I will inform court staff and not enter the courthouse building in the event I am exhibit conditions: Fever over 100. 4 degrees * Cough, shortness of breath or difficulty bre Fatigue, muscle or body aches, headache * Sore throat, congestion or runny nose 5) I will inform the court staff and not enter the courthouse building in the event I can are you traveled internationally within 14 days of the date of the in-person appearance? * who has traveled internationally within 14 days of the in-person appearance * Have with experienced any cold or flu-like symptoms in the 14 days preceding the in-person 	Court's in-person authorization and order. erra, State of California and CDC guidelines which covers my nose and mouth. (See, www.sierra.courts.ca.gov) ring or have experienced any of the following athing * New loss of taste or sense of smell * Nausea, vomiting or diarrhea. Is wer yes to any of the following criteria: Have * Have you had close contact with or cared for Have you been in close contact with anyone you or anyone you have been in close contact	
ou are obligated to notify the Court promptly if the facts and circumstances surrounding and time of the in-person appearance.	aspect of this application change prior to the	
agree to the terms and conditions in the Advisement above becoming an order of the Court	if this request is approved by the Court.	
declare under penalty of perjury under the laws of the State of California that the foregoing	is true and correct.	
Date: Print Name: Signa	ture:	
FOR COURT USE ONLY The request to appear in person is □ GRANTED □ DENIED		
GOOD CAUSE APPEARING. IT IS SO ORDERED:		

Judicial Officer

Date: ___

	(Print Name)	(Signature of Person Who Served Request)
l declare under pe correct.	enalty of perjury under the laws of the	State of California that the foregoing and all attachments are true and
	☐ Additional page is attached.	
c. 🗆 Other	r (specify):	
	(c) Place of mailing (city and state).	
	(b) Date mailed:	
	(a) Address where delivered:	
(2) Na	me of party or attorney served:	
(1) l er (b)	be with the United States Postal Service with the postage fully prepaid. ection and mailing on the date and at the place shown below, following m readily familiar with this business's practice for collecting and mailing. On the same day that correspondence is placed for collection e ordinary course of business with the United States Postal Service in a
	(c) Time delivered:	
	(b) Date delivered:	
	(a) Address where delivered:	
	nal delivery. I personally delivered a of party or attorney served:	copy and all attachments as follows: (1)
I served a contact each person		phone Appearance and all attachments as follows (check a, b, or c for
2. My residence	e or business address is (specify):	
1. At the time of	of service I was at least 18 years of ag	ge and not a party to the legal action.
	Р	ROOF OF SERVICE
DEFENDANT/RESP OTHER:	ONDENT.	
PLAINTIFF/PETITIONER:		CASE NUMBER: