ATTORNEY OR PARTY WITHOUT ATTORNEY:	STATE BAR NO.:		FOR COURT USE ONLY
NAME:			
FIRM NAME:			
STREET ADDRESS:			
CITY:	STATE:	ZIP CODE:	
TELEPHONE NO.:	FAX NO.:		
E-MAIL ADDRESS:			
ATTORNEY FOR (*name*):			
PEOPLE OF THE STATE OF CALIFORNIA, COUNTY OF TEHAMA v. DEFENDANT:			CASE NUMBER:

PETITION/APPLICATION (Health and Safety Code, § 11361.8)
ADULT CRIME(S)

☐ **FOR RESENTENCING OR DISMISSAL (H & S § 11361.8(b))**

☐ **REDESIGNATION OR DISMISSAL/SEALING (H & S § 11361.8(f))**

FOR COURT USE ONLY
Date:
Time:
Department:

INSTRUCTIONS

•Before filing this form, petitioner/applicant should consult local court rules and court staff to determine if a formal hearing on the petition/application will be scheduled.
•If petitioner is currently serving a sentence for a qualified crime, please fill out sections 1 and 2.
•If the applicant has completed the sentence for a qualified crime, please fill out sections 1 and 3.
•Complete sections 4 and 5 as necessary.
•Upon the filing of the petition/application, the petitioner/applicant is required to immediately serve the office of the prosecuting agency (the district attorney or city attorney, as appropriate) with a copy of the petition/application. It may be served personally or by mail; the signed Proof of Service, attached to this form, must be filed with the court.

1. **CONVICTION INFORMATION**

CONVICTION A:

On *(date):* _____, Petitioner/Applicant, the defendant in the above-entitled criminal action, was convicted of the following Health and Safety Code section ☐ 11357 ☐ 11358 ☐ 11359 ☐ 11360, which has been reclassified under Proposition 64.

Petitioner/Applicant further states that when committing the conduct resulting in the conviction he/she was:
☐ 18 to 20 years of age; ☐ 21 years old or older. Date of birth: _____

Petitioner/Applicant further states that the nature of the substance which resulted in the conviction was:
☐ marijuana not in the form of concentrated cannabis; ☐ concentrated cannabis; ☐ marijuana plants;
☐ other: _____

Petitioner/Applicant further states that the quantity of the substance which resulted in the conviction was:
☐ not more than 28.5 grams of marijuana not in the form of concentrated cannabis; ☐ not more than 4 grams of marijuana in the form of concentrated cannabis; ☐ not more than 8 grams of marijuana in the form of concentrated cannabis;
☐ not more than 6 marijuana plants.

CONVICTION B:

On *(date):* _____, Petitioner/Applicant, the defendant in the above-entitled criminal action, was convicted of the following Health and Safety Code section ☐ 11357 ☐ 11358 ☐ 11359 ☐ 11360, which has been reclassified under Proposition 64.

Petitioner/Applicant further states that when committing the conduct resulting in the conviction he/she was:
☐ 18 to 20 years of age; ☐ 21 years old or older. Date of birth: _____

Petitioner/Applicant further states that the nature of the substance which resulted in the conviction was:
☐ marijuana not in the form of concentrated cannabis; ☐ concentrated cannabis; ☐ marijuana plants;
☐ other: _____

Petitioner/Applicant further states that the quantity of the substance which resulted in the conviction was:
☐ not more than 28.5 grams of marijuana not in the form of concentrated cannabis; ☐ not more than 4 grams of marijuana in the form of concentrated cannabis; ☐ not more than 8 grams of marijuana in the form of concentrated cannabis;
☐ not more than 6 marijuana plants.

PEOPLE OF THE STATE OF CALIFORNIA v. DEFENDANT:

CASE NUMBER:

2. **REQUEST FOR RELIEF**

a. ☐ **RESENTENCING/DISMISSAL**

Petitioner is currently serving the sentence for the crime noted above, and requests the sentence be recalled and that he/she be resentenced or the charge be dismissed as required by law.

☐ Other: _____

b. ☐ **REDESIGNATION/DISMISSAL/SEALING**

Applicant has completed the sentence for the crime noted above, and requests the sentence be recalled and the conviction be redesignated or dismissed. If the conviction is dismissed, applicant requests the court's record of conviction be sealed.

☐ Other: _____

3. **WAIVER OF HEARING BY ORIGINAL SENTENCING JUDGE**

☐ Petitioner/applicant waives the right to have this matter heard by the original sentencing judge. The Presiding Judge of the court may designate any judge to rule on this matter.

4. **WAIVER OF APPEARANCE**

☐ Petitioner/applicant understands there is a right to personally attend any hearing held in this matter. Petitioner/applicant gives up that right; the matter may be heard without his/her appearance.

Dated: _____ _____

Signature of petitioner/applicant

PROSECUTING AGENCY RESPONSE

☐ The prosecuting agency has no objection to this petition/application. Petitioner/applicant is entitled to the requested relief without a hearing.

☐ The prosecuting agency requests a hearing and objects to the granting of the petition/application because:

☐ Petitioner/applicant was not convicted of an eligible offense.

☐ Other: _____

☐ Petitioner is eligible for relief, but relief should be denied because petitioner presents an unreasonable risk of danger to public safety if he/she is resentenced.

☐ The prosecuting agency does not object to the petitioner's/applicant's eligibility for relief, but requests a hearing on the issue of resentencing.

Dated: _____ _____

Signature of prosecuting attorney

PROOF OF SERVICE

☐ Personal Service ☐ Service by Mail

1. Person serving: I am over the age of 18 and not a party to this action.

(1) Name: _____

(2) Address: _____

(3) Telephone: _____

2. I served a copy of the Petition/Application for Resentencing or Reduction to Infraction as follows *(check one)*:

☐ a. Personal Service: I personally delivered the Petition/Application for Resentencing or Reduction to Infraction to the person at the address listed below:

(1) Name of person served: _____

(2) Address where served: _____

(3) Date Served: _____

(4) Time Served: _____ ☐ AM ☐ PM

☐ b. Service by Mail: I deposited the Petition/Application for Resentencing or Reduction to Infraction in the United States mail, in a sealed envelope with first class postage fully prepaid. The envelope was addressed as follows:

(1) Name of person served: _____

(2) Address: _____

(3) Date of Mailing: _____

(4) Place of Mailing (city and state): _____

I declare to the best of my information and belief that the foregoing is true and correct.

Date: _____

_____
(Signature of Declarant)

_____
(Printed Name of Declarant)