

ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: FIRM NAME: STREET ADDRESS: STATE: ZIP CODE CITY: TELEPHONE NO: E-MAIL ADDRESS: ATTORNEY FOR (Name):	STATE BAR NO:
SUPERIOR COURT OF CALIFORNIA, COUNTY OF TULARE <input type="checkbox"/> Visalia - 211 S. Mooney Blvd., Visalia, CA 93291 <input type="checkbox"/> South County Justice Center - 300 E. Olive Ave., Porterville, CA 93257	
PEOPLE OF THE STATE OF CALIFORNIA vs. Defendant:	Hearing Date: Time: Department:
PETITION/APPLICATION	
<input type="checkbox"/> FOR RESENTENCING or DISMISSAL (Health & Safety Code § 11361.8(a),(b))	<input type="checkbox"/> FOR REDUCTION OR DISMISSAL/SEALING (Health & Safety Code § 11361.8(e),(f))
CASE NUMBER:	

1. CONVICTION INFORMATION

On (date) _____, Petitioner/Applicant, the defendant in the above-entitled criminal action whose date of birth is _____, was convicted of the following felony or misdemeanor offenses(s) that has/have now been reclassified as legally invalid, a misdemeanor, or an infraction offenses(s) (specify code(s) and sections(s)): _____ and was sentenced to (specify sentence imposed): _____

A. RESENTENCING or DISMISSAL

Petitioner is currently serving the above sentence and requests under Health & Safety Code §11361.8(a), (b) that the:

- Felony Sentence(s) be recalled and that Petitioner be resentenced to misdemeanor(s).
- Felony Sentence(s) be recalled and that Petitioner be resentenced to infraction(s).
- Misdemeanor Sentence(s) be recalled and that Petitioner be resentenced to infraction(s).
- Felony/misdemeanor/infraction sentence(s) listed above be dismissed because the sentence(s) is/are now legally invalid.

Custody status:

Petitioner is currently in custody at (location) _____, inmate number _____; and is is not requesting to be transported for the hearing.

B. REDUCTION OR DISMISSAL/SEALING

Applicant has completed the above sentence and requests under Health & safety Code §11361.8(e), (f) that the:

- Felony conviction(s) listed above be reduced to misdemeanor(s).
- Felony conviction(s) listed above be reduced to infraction(s).
- Misdemeanor conviction(s) listed above be reduced to infraction(s).
- Felony/misdemeanor/infraction conviction(s) listed above be dismissed and sealed because the prior conviction(s) is/are now legally invalid.

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

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER/APPLICANT OR ATTORNEY)

Defendant Name:	Case Number:
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PROOF OF SERVICE

2. I served a copy of the Petition/Application for Resentencing or Dismissal, for Reduction or Dismissal/Sealing as follows (check one):

a. Personal Service: I personally delivered the Petition/Application for Resenting or Dismissal, for Reduction or Dismissal/Sealing to the Tulare County District Attorney at the address listed below:

Visalia Division
221 S Mooney Blvd # 224,
Visalia, CA 93291643

South County Justice Center
643 N Westwood
Porterville, CA 93257

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

Visalia Division
221 S Mooney Blvd # 224,
Visalia, CA 93291643

South County Justice Center
643 N Westwood
Porterville, CA 93257

I have served a copy of this Petition/Application on the Tulare County Office of the District Attorney.

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER/APPLICANT OR ATTORNEY)