

SUPERIOR COURT OF CALIFORNIA COUNTY OF SAN FRANCISCO

400 McAllister Street, San Francisco, CA 94102

Phone: 415-551-4000 | Website: <https://sfsuperiorcourt.org>



ZOOM REQUEST PROCEDURE FOR SMALL CLAIMS

If you are requesting a Zoom appearance you will need to do the following:

1. At least 10 calendar days before the hearing the party requesting to appear by Zoom must obtain and submit the following forms to the Court:
 - Request to Appear by Zoom
 - Declaration Re: Request to Appear by Zoom
 - Order Re: Request to Appear by Zoom
2. Fill out pages 2, 3, and the top half of page 4. Mail these original forms, with one set of copies, and a self-addressed stamped envelope, to the Small Claims Division, San Francisco Superior Court, 400 McAllister Street, Room 103, San Francisco, CA 94102.
3. After a Judicial Officer reviews your request, the court will send you a signed copy of the order indicating if your request has been granted or denied. If your request is granted see #4 below. If your request is denied an appearance is required.
4. If the request is granted, the party requesting to appear by Zoom must do so by dialing: + 1 669 900 6883 and entering the meeting ID and password below:
Department 506: Zoom meeting ID: 861 1317 3445, Zoom password: 805364
5. If you have evidence such as documents or pictures, which support your case, **send them to the opposing party and send them to the Court at least 5 days in advance of the hearing.**
6. On the day of your hearing, when you are appearing by Zoom, be prepared to discuss your case as if you were present in court.

REQUEST TO APPEAR AT HEARING BY ZOOM

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR: NAME: FIRM NAME: STREET ADDRESS: CITY AND ZIP CODE: E-MAIL ADDRESS: ATTORNEY FOR (NAME):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN FRANCISCO STREET ADDRESS: MAILING ADDRESS: 400 MCALLISTER STREET, ROOM 103 CITY AND ZIP CODE: SAN FRANCISCO, CA 94102 BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
REQUEST TO APPEAR AT HEARING BY ZOOM (SMALL CLAIMS)	CASE NUMBER: Hearing Date: _____ Time: _____ Department: _____

Party requesting to appear by ZOOM (printed name): _____

Reason for this Request: _____

OR

I am not a California resident; I reside in the state of _____.

I work outside of the State of California. I work in _____.

I live outside of the nine Bay Area counties (Alameda, Contra Costa, Marin, Napa, San Mateo, San Francisco, Santa Clara, Solano, Sonoma). I live in _____ county.

I am incarcerated at _____ jail/prison and will be incarcerated at the time of the court hearing.

Other extraordinary circumstances:

Date: _____

Signature _____

Printed Name: _____

REQUEST TO APPEAR AT HEARING BY ZOOM

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR: NAME: FIRM NAME: STREET ADDRESS: CITY AND ZIP CODE: E-MAIL ADDRESS: ATTORNEY FOR (NAME):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN FRANCISCO STREET ADDRESS: MAILING ADDRESS: 400 MCALLISTER STREET, ROOM 103 CITY AND ZIP CODE: SAN FRANCISCO, CA 94102 BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
DECLARATION RE: REQUEST TO APPEAR AT HEARING BY ZOOM (SMALL CLAIMS)	CASE NUMBER: Hearing Date: _____ Time: _____ Department: _____

I gave notice of the Request to Appear by Zoom to the: Plaintiff Defendant

On (date): _____ by:

Telephone call at (phone number): _____

Personally informing at (address): _____

Giving a copy of the Request to Appear by Zoom by:

Personal delivery at: _____ AM PM on (date): _____

Overnight mail/other overnight carrier, sent at: _____ AM PM

On (date): _____

Fax transmission at: _____ AM PM on (date): _____

Other: _____

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

Date: _____

 Signature

Printed Name: _____

DECLARATION RE: REQUEST TO APPEAR AT HEARING BY ZOOM

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR: NAME: FIRM NAME: STREET ADDRESS: CITY AND ZIP CODE: E-MAIL ADDRESS: ATTORNEY FOR (NAME):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN FRANCISCO STREET ADDRESS: MAILING ADDRESS: 400 MCALLISTER STREET, ROOM 103 CITY AND ZIP CODE: SAN FRANCISCO, CA 94102 BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
ORDER RE: REQUEST TO APPEAR AT HEARING BY ZOOM (SMALL CLAIMS)	CASE NUMBER: Hearing Date: _____ Time: _____ Department: _____

Plaintiff's Defendant's request to appear by Zoom at the hearing scheduled for _____ is hereby GRANTED DENIED.

The Plaintiff Defendant shall call the Court's approved vendor to set up the telephonic appearance and pay associated fees. The Plaintiff Defendant shall notify the Plaintiff Defendant of this order by any reasonable means, including by telephone, fax, or mail.

The Plaintiff Defendant shall send, in advance of the hearing date, any documents, pictures, or other evidence concerning the case that you wish the Court to consider, so that the Court can review them during your hearing.

On the day of your hearing, be prepared to discuss your case just as if you were present in court.

Date: _____

 Judge of the Superior Court/Judicial Officer

ORDER RE: REQUEST TO APPEAR AT HEARING BY ZOOM