

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):		<b>FOR COURT USE ONLY</b>          
PEOPLE OF THE STATE OF CALIFORNIA v. DEFENDANT:		
<b>PETITION/APPLICATION (Health and Safety Code, § 11361.8)          ADULT CRIME(S)</b>  <input type="checkbox"/> <b>RESENTENCING OR DISMISSAL</b> (Health & Saf. Code, § 11361.8(b)) <input type="checkbox"/> <b>REDESIGNATION OR DISMISSAL/SEALING</b> (Health & Saf. Code, § 11361.8(f))		CASE NUMBER:   <b>FOR COURT USE ONLY</b> Date: Time: Department:

**1. CONVICTION INFORMATION (Check all that apply)**

- ☐ 11357 - Possession of Marijuana
- ☐ 11358 - Cultivation of Marijuana
- ☐ 11359 - Possession of Marijuana for Sale
- ☐ 11360 - Transportation, Distribution, or Importation of Marijuana
- ☐ 11362.1 - Personal Use of Marijuana

**2. REQUEST (check all that apply)**

- ☐ PETITION: Petitioner is currently serving a sentence in the above-captioned case and now requests the court recall/resentence/dismiss the conviction.
- ☐ APPLICATION: Applicant has completed his/her sentence in the above captioned case and now requests the court dismiss & seal/redesignate the conviction.

**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

**Form CR-401 (Proof of Service for Petition/application adult crimes) may be used to provide proof of service of this petition/application.**

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