

LPS CONSERVATORSHIP REAPPOINTMENT PROCEDURE

SELF-HELP FORM PACKET

Attention



New Probate Court and In-Person Location:

Costa Mesa Justice Complex
3390 Harbor Boulevard
Costa Mesa, CA 92626



SHC-PB-05 (Rev. 04/24/2025)

Self-Help Services can review your completed forms before you file them with the Court. To request review of your completed forms:

1. Complete the attached forms in black ink.
2. Scan your completed forms and save as a single PDF file.
3. Go to **www.occourts.org/self-help** (click the teal button labeled *Contact Self-Help*), attach the PDF, and complete the online request form. Make sure to select PROBATE as the case type on the form.

LPS CONSERVATORSHIP REAPPOINTMENT

COMMON WORDS

Conservatorship: Court process giving one adult the legal responsibility to make decisions for another adult who is unable to care for themselves. The reason why the adult is unable to care for themselves determines the type of Conservatorship needed.

Evidentiary Hearing: A hearing scheduled if a Conservatee opposes a Petition for Reappointment. The LPS Conservator must present evidence proving an LPS Conservatorship is necessary.

Gravely Disabled: Court finding that an adult cannot meet their own basic needs for food, clothing, or shelter because of a Mental Disorder.

LPS Conservator: Adult appointed by the Court to make decisions for a Gravely Disabled adult.

LPS Conservatorship: Legal process that gives one adult the authority to make decisions for a Gravely Disabled adult.

LPS Conservatee: Adult found by Court to be Gravely Disabled.

Mental Disorder: A serious mental health diagnosis, including, but not limited to, schizophrenia, bi-polar disorder, schizoaffective disorder, clinical depression, and obsessive-compulsive disorder.

OVERVIEW

An **LPS Conservatorship** gives one adult the legal responsibility to make certain decisions for another adult who has a serious **Mental Disorder** and is **Gravely Disabled**. Family members or other individuals cannot start the **LPS Conservatorship** process. In Orange County, the process is started by the Orange County Public Guardian. However, family members or other individuals can be named an **LPS Conservator**.

This form packet is for adults that have already been named **LPS Conservator** and want to be reappointed for another year. This is not a form packet to request a new **LPS Conservatorship**.

If you need assistance starting a new **LPS Conservatorship**, contact the Orange County Public Guardian at:

1300 S. Grand Ave., Building C, Santa Ana, California 92705
Monday – Friday, 8:00 a.m. – 5:00 p.m.
714-567-7660

If you need assistance starting any other type of **Conservatorship**, please reach out to Self-Help.

Petition for Reappointment

An **LPS Conservatorship** only lasts one year. About 90 days before it expires, the Court will mail a notice of expiration warning that the **LPS Conservatorship** will expire soon. A sample notice of expiration is attached.

The Court will not automatically approve reappointment. The **LPS Conservator** must file a Petition for Reappointment **at least** 30 days before the termination date.

A hearing will be required for the **LPS Conservator** to show that:

- ☐ The **LPS Conservatee** continues to be **Gravely Disabled**,
- ☐ As a result of a **Mental Disorder**, and
- ☐ Is unwilling to accept or incapable of accepting treatment voluntarily.

There is no limit to how many times an **LPS Conservatorship** may be renewed.

PROCEDURE

[Forms in **BOLD** are attached. If you are viewing this packet on an internet enabled device, you can click on them to open electronic fillable versions.]

Required Forms

- ☐ **L-0984a: Petition for Reappointment of Conservator**
- ☐ **L-0984b: Declaration of Physician or Qualified Licensed Psychologist**
- ☐ **L-0984c: Notice of Hearing on Petition for Reappointment of Conservator**
- ☐ **L-0984d: Declaration of Service**
- ☐ **L-0984e: Order Reappointing Conservator**

Complete Forms

- ☐ **L-0984a: Petition for Reappointment of Conservator**
 - The **LPS Conservatee's** name must appear exactly as it does on the Letters of Conservatorship.
 - For example, if the name is listed as "John Smith AKA John J. Smith," that is how it must appear on all reappointment forms.
- ☐ **L-0984b: Declaration of Physician or Qualified Licensed Psychologist**
 - Must be completed and signed by two physicians or licensed psychologists treating the **LPS Conservatee**.
 - Most professionals will need time to complete it, plan accordingly and provide the form as soon as possible.
 - Once complete, attach it to **L-0984a: Petition for Reappointment of Conservator**.
- ☐ **L-0984c: Notice of Hearing on Petition for Reappointment of Conservator**
 - Do not complete the date, time, and department fields. These will be provided when **L-0984a: Petition for Reappointment of Conservator** is filed.
- ☐ **L-0984e: Order Reappointing Conservator**
 - After the hearing, the Judge will sign this form. However, before filing, the captions, headings, Items 1 and 3a must be completed.

PROCEDURE ROADMAP



Forms



Medical
Declaration



File



Service



Complete
Declaration of Service



Hearing

Document Review

The Self-Help Probate Team offers a free optional document review service for self-represented litigants. As part of this service, an attorney or paralegal will review your documents for completion before filing. **Our staff cannot provide you with legal advice or strategy during the review.** To have your completed documents reviewed, please attach them to your contact request here: www.occourts.org/self-help/

Filing Fee

The first time **L-0984a: Petition for Reappointment of Conservator** is filed; there is a filing fee. To learn more visit: <https://www.occourts.org/forms-filing/fee-schedule>

If the **LPS Conservatee** cannot afford the fee, a request asking the Court to waive the fee can be filed on their behalf by completing: <https://www.occourts.org/system/files/selfhelp/shc-pb-12.pdf>

The fee or fee waiver must be provided at the time of filing.

After the first time, there is no filing fee.

File Your Forms

You may file your completed forms by choosing one of the following:

- ☐ In Person:
 - Costa Mesa Justice Complex, 3390 Harbor Boulevard, Costa Mesa, CA 92626
- ☐ DropBox:
 - Costa Mesa Justice Complex, 3390 Harbor Boulevard, Costa Mesa, CA 92626
- ☐ Mail:
 - Costa Mesa Justice Complex, ATTN: Probate Filing Clerk, 3390 Harbor Boulevard, Costa Mesa, CA 92626
- ☐ E-Filing:
 - For additional information visit the court's website:
 - <https://www.occourts.org/online-services/efiling/efiling-probate.html>

Serve Your Forms

Service is the act of giving certain forms to persons or entities. The following forms must be served:

- ☐ Copy of **filed L-0984a: Petition for Reappointment of Conservator**
- ☐ Copy of **filed L-0984c: Notice of Hearing on Petition for Reappointment of Conservator**

PROCEDURE ROADMAP



Forms



Medical
Declaration



File



Service



Complete
Declaration of Service



Hearing

How Must Service be Completed?

- ☐ Service by mail is required. Standard mail is sufficient.
- ☐ The **LPS Conservator** completes service.

Who Must be Served?

- ☐ Orange County Health Care Agency
 - o Mental Health Director
405 West 5th Street, Suite 458
Santa Ana, CA 92701
- ☐ Orange County Public Guardian
 - o P.O. Box 11526
Santa Ana, CA 92711
- ☐ Orange County Public Defender
 - o 200 W. Santa Ana Blvd., Suite 970
Santa Ana, CA 92701
- ☐ **LPS Conservatee**
- ☐ If Applicable:
 - o Facility where **LPS Conservatee** resides.

Complete and File Declaration of Service

- ☐ **L-0984d: Declaration of Service**
 - o The date of service, how service was completed, name or entity served, and the address where service was provided must be listed.
 - o The completed form must be filed as soon as possible.

Hearing

- ☐ The **LPS Conservator** must attend the hearing.
- ☐ The **LPS Conservatee** may attend but is not required to.
- ☐ The **LPS Conservatee** has the right to oppose the reappointment.

Evidentiary Hearing

- ☐ If the **LPS Conservatee** opposes the reappointment, an **Evidentiary Hearing** will be scheduled.
- ☐ At the **Evidentiary Hearing**, the **LPS Conservator** will need to prove that the **LPS Conservatorship** is still necessary because the **LPS Conservatee** still has a serious **Mental Disorder** and is **Gravely Disabled**.
 - o The testimony of a psychiatrist or psychologist who has examined the **LPS Conservatee** will be required.
- ☐ **Evidentiary Hearings** can be complicated. If one is scheduled, **LPS Conservator's** may want to hire an attorney for assistance. If an **LPS Conservator** cannot afford an attorney, the Court may be able to assist in finding an attorney at no charge.

PROCEDURE ROADMAP



Forms



Medical
Declaration



File



Service



Complete
Declaration of Service



Hearing

SUPERIOR COURT OF CALIFORNIA, COUNTY OF	<p style="text-align: right;"><i>FOR COURT USE ONLY</i></p> <p style="text-align: center; font-size: 1.2em;">[SAMPLE NOTICE OF TERMINATION]</p>
<p>IN RE THE CONSERVATORSHIP OF THE PERSON OF:</p> <p style="text-align: right;">CONSERVATEE</p>	
NOTICE OF TERMINATION OF CONSERVATORSHIP	CASE NUMBER:

THE PEOPLE OF THE STATE OF CALIFORNIA TO notify the above-named conservatee and:
(conservatee's attorney, conservator, and professional person in charge of the facility in which the conservatee resides, county mental health director and county officer providing conservatorship investigations.)

The one-year conservatorship established for the above-named conservatee pursuant to Section 5350 of the Welfare and Institutions Code will terminate on [REDACTED]. To reestablish conservatorship for another year the conservator must petition the court by at least 30 days before the termination date. Subject to a request for a court hearing by jury trial the Judge may, on his or her own motion, accept or reject the conservator's petition.

If the conservator petitions to reestablish conservatorship, notice must be given to the conservatee; the professional person in charge of the facility in which he resides, the conservatee's attorney, and, if the conservator is a private party, the county mental health director and the county officer providing conservatorship investigation. If any of them request it, there shall be a court hearing or jury trial, whichever is requested, on the issue of whether the conservatee is still gravely disabled and in need of conservatorship. If the private conservator does not petition for reappointment, the county officer providing conservatorship investigation may recommend another conservator. Such a petition shall be considered a petition for reappointment of conservator.

Visit the Court's website at www.occourts.org for Conservatorship Reappointment forms.

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name & Address</i>): Telephone No.: _____ Fax No. (Optional): _____ E-Mail Address (Optional): _____ ATTORNEY FOR (<i>Name</i>): _____ Bar No: _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE Costa Mesa Justice Complex 3390 Harbor Blvd. Costa Mesa, CA 92626-1554	
IN THE MATTER OF:	
PETITION FOR REAPPOINTMENT OF CONSERVATOR	CASE NUMBER:

PETITIONER (*name*): _____ states:

1. a. Petitioner was appointed conservator of the person of the conservatee (*name*): _____
 b. Petitioner qualified, and Letters of Conservatorship were duly issued on or about (*date*): _____
 c. Petitioner is now, and since that date has been, the duly appointed, qualified, and acting conservator of the person of the conservatee.
2. The conservatee is presently confined at: _____
 It is the professional opinion of: _____, M.D.
 and _____ M.D., as set forth in their
declaration dated: _____ (attached as "Exhibit A" and incorporated by reference) that
 the conservatee is still gravely disabled as a result of a mental disorder or impairment by chronic alcoholism
 and is unwilling to accept or incapable of accepting treatment voluntarily.
3. Petitioner is informed and believes and on that information and belief alleges that the conservatee is still a
 gravely disabled person as defined in Section 5008(h) of the Welfare and Institutions Code as a result of a
 mental disorder or impairment by chronic alcoholism, is unwilling to accept or incapable of accepting
 treatment voluntarily, and is in need and does require a conservator of his or her person.
4. It is in the best interests of the conservatee and necessary that the conservator have the following powers:
 - a. The power to place, for the purpose of involuntary care and treatment, the conservatee in a medical,
 psychiatric, nursing or other state- licensed facility, or a state hospital, county hospital, hospital operated
 by the Regents of the University of California, United States Government Hospital, or other nonmedical
 facility approved by the State Department of Health Care Services or an agency accredited by the State
 Department of Health Care Services; or, in cases of chronic alcoholism, in a county alcoholic treatment
 center, as provided in Section 5358 of the Welfare and Institutions Code.
 - b. The power to require the conservatee to receive treatment related specifically to remedying or preventing
 the recurrence of the conservatee's being gravely disabled.
 - c. The power to require conservatee to receive other medical treatment unrelated to remedying or preventing
 the recurrence of the conservatee's being gravely disabled which is necessary for the treatment of an
 existing or continuing medical condition, namely (specify medical condition and treatment):

5. It is necessary and in the best interests of the conservatee that the conservatee not be permitted to
 possess a license to operate a motor vehicle, nor to possess or carry firearms.

IN THE MATTER OF:	CASE NUMBER:
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WHEREFORE, Petitioner prays that:

1. A conservator of the person be reappointed for the conservatee.
2. The conservator of the person be given the power to place, for the purpose of involuntary care and treatment, the conservatee in a medical, psychiatric, nursing, or other state-licensed facility, or a state hospital, county hospital, hospital operated by the Regents of the University of California, United States Government hospital, or other nonmedical facility approved by the State Department of Mental Health; or, in a case of chronic alcoholism, in a county alcoholic treatment center pursuant to section 5358 of Welfare and Institutions Code.
3. The conservator of the person be given the powers to require the conservatee to receive treatment related specifically to remedying or preventing the recurrence of the conservatee's being gravely disabled and to require the conservatee to receive other medical treatment unrelated to remedying or preventing the recurrence of the conservatee's being gravely disabled, which is necessary for the treatment of an existing or continuing medical condition, namely (*specify medical condition and treatment*): _____

4. The conservatee not be allowed to possess a license to operate a motor vehicle, nor possess or carry firearms.
5. Other relief be granted as the court deems proper.

Dated: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF CONSERVATOR)

VERIFICATION

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

Dated: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF CONSERVATOR)

Name: _____ Case No.: _____

Address: _____ City, State, Zip: _____

Age: _____ Sex: _____ Birthdate: _____ Date of Current Evaluation: _____

Previous Diagnosis: _____

1. Is there a mental disorder? Please give a diagnosis and explain the symptoms.

2. Can the individual provide for his or her basic needs (i.e., food, clothing, or shelter) in an unsupervised setting? Why do you feel he or she can or cannot?

3. Do you feel this individual is incapable or unwilling to accept voluntary treatment?

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

Executed on (date): _____

(SIGNATURE OF EVALUATOR)

(TITLE)

(SIGNATURE OF EVALUATOR)

(TITLE)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name & Address</i>): Telephone No.: _____ Fax No. (Optional): _____ E-Mail Address (Optional): _____ ATTORNEY FOR (<i>Name</i>): _____ Bar No: _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE Costa Mesa Justice Complex 3390 Harbor Blvd. Costa Mesa, CA 92626-1554	
IN THE MATTER OF:	
DECLARATION OF SERVICE	CASE NUMBER:

I, the undersigned, hereby declare that I mailed, or hand delivered a copy of the Petition for Reappointment of Conservator and Notice of Hearing as follows:

1. Date: _____ ☐ Mailed ☐ Hand Delivered to:

Orange County Health Care Agency
 Mental Health Director
 405 West 5th Street, Suite 458
 Santa Ana, CA 92701
2. Date: _____ ☐ Mailed ☐ Hand Delivered to:

Orange County Public Guardian
 P.O. Box 11526
 Santa Ana, CA 92711
3. Date: _____ ☐ Mailed ☐ Hand Delivered to:

Orange County Public Defender
 200 W. Santa Ana Blvd., Suite 800
 Santa Ana, CA 92701
4. Date: _____ ☐ Mailed ☐ Hand Delivered to:

Conservatee: _____
 Address: _____

5. Date: _____ ☐ Mailed ☐ Hand Delivered to:

Facility: _____
 Address: _____

6. Date: _____ ☐ Mailed ☐ Hand Delivered to:

Other: _____
 Address: _____

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF CONSERVATOR)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name & Address</i>): Telephone No.: _____ Fax No. (Optional): _____ E-Mail Address (Optional): _____ ATTORNEY FOR (<i>Name</i>): _____ Bar No: _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE Costa Mesa Justice Complex 3390 Harbor Blvd. Costa Mesa, CA 92626-1554	
IN THE MATTER OF:	
ORDER REAPPOINTING CONSERVATOR	CASE NUMBER:

1. The petition for the reappointment of a conservator of the person of (*name*): _____ came regularly for hearing on (*date*): _____.
 (*Name*): _____ appeared on behalf of the conservatee.
 - ☐ The conservatee was present in court and was advised of his or her right to a court or jury trial.
 - ☐ The presence of the conservatee was waived.
 - ☐ The conservatee did not waive his or her right to trial, but consented to the reappointment of a conservator by the court.
2. THE COURT FINDS, after examining the petition and hearing the evidence, that
 - a. All notices of the hearing have been given as required by law.
 - b. The conservatee is still gravely disabled as defined in Section 5008(h) for the purposes of Section 5350 of the Welfare and Institutions Code.
 - c. It is in the best interests of the conservatee that a conservator of his or her person be reappointed.
3. IT IS ORDERED,
 - a. (*Name*): _____ is reappointed conservator of the person of (*name*): _____ and appropriate Letters of Conservatorship shall be issued to the conservator upon filing the oath required by Section 2300 of the Probate Code.
 - b. The conservator shall have the power to require the conservatee to receive treatment related specifically to remedying or preventing the recurrence of the conservatee's being gravely disabled and to require the conservatee to receive treatment for an existing or continuing medical condition described as follows (specify): _____

 - c. The conservator shall be guided by the advice of medical doctors specializing in psychiatry and other qualified medical and social welfare personnel. The conservator is authorized to require that the conservatee be detained in a facility providing intensive treatment for the purpose of involuntary care and treatment, or to place this conservatee in a medical, psychiatric, nursing, or other state-licensed facility or state hospital, county hospital, hospital operated by the Regents of the University of California, United States Government hospital, or a nonmedical facility approved by the State Department of Health Care Services or an agency accredited by the State Department of Health Care Services pursuant to Section 5358 of the Welfare and Institutions Code.

IN THE MATTER OF:	CASE NUMBER:
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- d. The conservatee shall not have the privilege of possessing a license to operate a motor vehicle, nor the right to possess or carry firearms.
- e. The conservatee shall not be allowed to refuse treatment related specifically to the conservatee's being gravely disabled, or to refuse treatment necessary for the treatment of an existing or continuing medical condition described as follows (specify): _____

- f. The Court determined that a
- ☐ State Hospital
 - ☐ Private locked facility
 - ☐ Private unlocked facility
 - ☐ Board and care facility
 - ☐ Current (specify): _____
 is the least restrictive and most appropriate placement for the conservatee.
- g. In addition to the conservatee's attorney and the county's patients' rights advocate, the following persons shall be notified of a placement more restrictive than the court-determined placement (names): _____

- h. (1) The reappointment shall be effective as of (date): _____
 (2) The conservatorship shall terminate on (date): _____
 unless a conservator is earlier reappointed.
- i. The declarations in support of reappointment of conservator shall be sealed and are not to be opened without a further order of the court.
- j. Other (specify): _____

Date: _____ (JUDGE OF THE SUPERIOR COURT)