

**NOTICE OF REQUEST FOR WRIT OF HABEAS CORPUS**

(Rev. 05/2020)

Confidential Patient Information  
See Welfare & Institutions Code  
Sections 5275 & 5328 and Penal  
Code 11142

HIPAA Privacy Rule  
45 C.F.R. § 164.508

**TO: OFFICE OF THE SAN DIEGO COUNTY PRIMARY PUBLIC DEFENDER**  
405 B STREET, SUITE 900, SAN DIEGO, CA 92101

**PUBLIC DEFENDER FAX NUMBER DURING COVID-19 PANDEMIC: (858) 999-8936**

On \_\_\_\_\_, I, \_\_\_\_\_, received a  
Date of Request Staff Person or Interested Third Party

request for release from \_\_\_\_\_ / \_\_\_\_\_ who is being  
Name of Patient DOB - If Available

detained at \_\_\_\_\_ for intensive treatment pursuant to the  
Name of Treatment Facility

following section of the Welfare and Institutions Code (check one):

- 5150 (72-hour hold)
- 5260 (second 14-day hold, DTS only)
- 5300 (180-day hold, DTO only)
- 5350 (conservatorship)
- 5250 (14-day hold)
- 5270.15 (30-day hold, GD only)
- 5352.1 (temporary conservatorship)
- Other (specify):

The person has been informed of his/her right to counsel. The person has requested the appointment of the Public Defender or other Attorney to assist him/her in preparation of a petition for a writ of habeas corpus pursuant to Section 5275 of the Welfare and Institutions Code.

\_\_\_\_\_  
Signature of staff person or interested third party Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Patient making request for release (not required) Date: \_\_\_\_\_

**CAUTION**

Any person who intentionally violates the provisions of Section 5275 requiring a staff member to notify the Superior Court of having received a request for release is guilty of a misdemeanor. See California Welfare and Institutions Code Section 5275 for additional information and requirements.