



5. Identification of Minors (if applicable)  No Minors involved.

Name (First, Middle Initial, Last)	Age	Race	Sex	How Related to		Resides with
				Petitioner	Respondent	

6. Other court cases or other restraining, protection or no-contact orders involving me, the minors and the respondent:

<b>Case Name</b>			
<b>Case Number</b>			
<b>Court/County</b>			

**I Request an Order for Protection** following a hearing that will:

<sup>1</sup>  **Restrain** respondent from causing any physical harm, bodily injury, assault, including sexual assault, and from molesting, harassing, threatening, or stalking  me  the minors named in paragraph 5 above  these minors only:

(If the court orders this relief, and you and the respondent are current or former spouses or domestic partners, parents of a child-in-common, age 16 or older and are/were in a dating relationship, and are currently residing together or resided together in the past, age 16 or older and are/were in a dating relationship, but have *never* resided together, the respondent will not be able to obtain or possess a firearm, other dangerous weapon, ammunition, or concealed pistol license for the duration of the order.)

<sup>2</sup>  **Restrain** respondent from harassing, following, keeping under physical or electronic surveillance, cyberstalking as defined in RCW 9.61.260, and using telephonic, audiovisual, or other electronic means to monitor the actions, locations, or wire or electronic communication of  me  the minors named in paragraph 5 above  only the minors listed below;  members of the victim's household listed below  the victim's adult children listed below:

<sup>3</sup>  **Restrain** respondent from coming near and from having any contact whatsoever, in person or through others, by phone, mail, or any means, directly or indirectly, except for mailing of court documents, with  me  the minors named in paragraph 5 above, subject to any court-ordered visitation  these minors only, subject to any court-ordered visitation:

<sup>4</sup>  **Exclude** respondent from  our shared residence  my residence  my workplace  my school  the residence, day care, or school of  the minors named in paragraph 5 above  these minors only:

other:

You have a right to keep your residential address confidential.

<p><sup>5</sup> <input type="checkbox"/> <b>Direct</b> respondent to vacate our shared residence and restore it to me.</p>
<p><sup>6</sup> <input type="checkbox"/> <b>Prohibit</b> respondent from knowingly coming within, or knowingly remaining within _____ (distance) of <input type="checkbox"/> our shared residence <input type="checkbox"/> my residence <input type="checkbox"/> my workplace <input type="checkbox"/> my school <input type="checkbox"/> the day care or school of <input type="checkbox"/> the minors named in paragraph 5 above. <input type="checkbox"/> these minors only:  <input type="checkbox"/> other:</p>
<p><sup>7</sup> <input type="checkbox"/> <b>Grant</b> me possession of essential personal belongings, including the following:</p>
<p><sup>8</sup> <input type="checkbox"/> <b>Grant</b> me use of the following vehicle: Year, Make &amp; Model _____ License No. _____</p>
<p><sup>9</sup> <input type="checkbox"/> <b>Other:</b></p>
<p>Protection involving a minor:</p>
<p><sup>10</sup> <input type="checkbox"/> Subject to any court-ordered visitation, <b>Grant</b> me the care, custody and control of <input type="checkbox"/> the minors named in paragraph 5 above <input type="checkbox"/> these minors only:</p>
<p><sup>11</sup> <input type="checkbox"/> <b>Restrain</b> respondent from interfering with my physical or legal custody of <input type="checkbox"/> the minors named in paragraph 5 above <input type="checkbox"/> these minors only:</p>
<p><sup>12</sup> <input type="checkbox"/> <b>Restrain</b> the respondent from removing from the state: <input type="checkbox"/> the minors named in paragraph 5 above <input type="checkbox"/> these minors only:</p>
<p>Additional Requests:</p>
<p><sup>13</sup> <input type="checkbox"/> <b>Direct</b> the respondent to participate in appropriate treatment or counseling services.</p>
<p><sup>14</sup> <input type="checkbox"/> <b>Require</b> the respondent to pay the fees and costs of this action.</p>
<p><sup>15</sup> <input type="checkbox"/> <b>Remain Effective</b> longer than one year because respondent is likely to resume acts of domestic violence against me if the order expires in a year.</p>
<p>Protection involving pets.</p>
<p><sup>16</sup> <input type="checkbox"/> <b>Grant</b> me exclusive custody and control of the following pet(s) owned, possessed, leased, kept, or held by me, respondent, or a minor child residing with either me or the respondent. (Specify name of pet and type of animal.):  _____.</p>

17  **Prohibit** respondent from interfering with my efforts to remove the pet(s) named above.

18  **Prohibit** respondent from knowingly coming within, or knowingly remaining within \_\_\_\_\_ (distance) of the following locations where the pet(s) are regularly found:  
 petitioner's residence (You have a right to keep your residential address confidential.)  
 \_\_\_\_\_ Park  
 other: \_\_\_\_\_

**Protection from Firearms and Other Dangerous Weapons**

19  **Require** the respondent to surrender all firearms, other dangerous weapons, and any concealed pistol licenses, and prohibit the respondent from accessing, obtaining, or possessing firearms, other dangerous weapons, or concealed pistol licenses.

Notice: If you **are** the respondent's intimate partner, after actual notice and an opportunity to be heard at the hearing, the court may be required to order the respondent to surrender firearms, other dangerous weapons, or concealed pistol licenses.

**I want emergency temporary protection effective immediately, that lasts (up to 14 days) until the court hearing:**

- An emergency exists as described below. I request that a **Temporary Order for Protection** granting the relief requested above in 1) through 12) be issued immediately, without prior notice to the respondent, to be effective until the hearing.
- I also request temporary surrender all firearms, other dangerous weapons, and any concealed pistol licenses without notice to the other party because irreparable injury could result if an order is not issued until the hearing.

What irreparable harm would result if an order is not issued immediately without prior notice to the respondent?

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**Request for Special Assistance from Law Enforcement Agencies:**

I request the court order the appropriate law enforcement agency to assist me in obtaining:

- Possession of my residence.  Possession of the vehicle designated above.
- Possession of my essential personal belongings at  the shared residence
- respondent's residence
- other location \_\_\_\_\_.

Custody of  the minors named in paragraph 5 above  these minors only (if applicable):

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Describe any violence or threats towards children: \_\_\_\_\_

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Describe any stalking behavior by respondent, including use of telephonic, audiovisual or electronic means to harass or monitor: \_\_\_\_\_

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Describe medical treatment you received and for what: \_\_\_\_\_

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Describe any threats of suicide or suicidal behavior by the respondent: \_\_\_\_\_

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Does the respondent own or possess firearms?  Yes  No

Does the respondent use firearms, weapons or objects to threaten or harm you? Please describe:

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Has the respondent used, displayed, or threatened to use a firearm or other dangerous weapon in a felony? Please describe:

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Is the respondent ineligible to possess a firearm under the provisions of RCW 9.41.040? Please describe:

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Does possession of a firearm or other dangerous weapon by the respondent present a serious and imminent threat to public health or safety, or to the health or safety of any individual?  
Please describe:

If you are requesting that the protection order lasts longer than one year, describe the reasons why:

Other:

(Continue on separate page if necessary.)

Check box if substance abuse is involved:  alcohol  drugs  other

Personal service cannot be made upon respondent within the state of Washington.

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

Dated: \_\_\_\_\_ at \_\_\_\_\_, Washington.

\_\_\_\_\_  
Signature of Petitioner

You have a right to keep your residential address confidential. If you have one, please provide an address, other than your residence, where you may receive legal documents: \_\_\_\_\_