

**MOTION TO MODIFY OR TERMINATE  
SEXUAL ASSAULT  
PROTECTION ORDER PACKET**

**If you are the protected party in the order, you may request assistance with this process. Please contact the Kitsap Sexual Assault Center Advocate:**



**Kitsap Sexual Assault Center**

**24 Hour Support Service  
360.479.8500  
1.866.831.2050**

**PO Box 1936  
Port Orchard, WA 98366**

**Beverly Van Santford  
Child & Family Advocate**

**T: 360.337.4950**

**beverly-ksac@wavecable.com  
ksacservices.com**

**715 Sidney Avenue  
Port Orchard, WA 98366**

**BAINBRIDGE ISLAND MUNICIPAL COURT  
Kitsap County, Washington**

Mail: PO Box 151, Rollingbay, WA 98061  
Location: 10255 NE Valley Rd, Bainbridge Island, WA  
Phone # 206-842-5641 Fax # 206-842-0316  
Email: court@bainbridgewa.gov

\_\_\_\_\_  
Petitioner (Protected Person) (DOB)  
vs.

\_\_\_\_\_  
Respondent (Restrained Person) (DOB)

No.

**Motion to Modify/Terminate Sexual  
Assault Protection Order  
(PTMD)**

Clerk's Action Required: para 2

I am:

The respondent

The petitioner

(Name): \_\_\_\_\_, and I am filing this motion on behalf of the petitioner.

**1. Request to Modify/Terminate**

I request that the court enter an order to  modify (change)  terminate the:

*Sexual Assault Protection Order*, filed on (date): \_\_\_\_\_

All provisions

Provision 1: No contact

Provision 2: Exclude from places

Provision 3: Stay away

Provision 4: other (specify)

\_\_\_\_\_  
 Provision 5: School transfer

Prohibit Weapons and Order Surrender

*Order to Surrender Weapons*, filed on (date): \_\_\_\_\_

**2. Hearing**

**Respondent only:** I request that the court find adequate cause and set a hearing.

**Petitioner only:** I request that the court set a hearing.

**3. Statement**

The *Sexual Assault Protection Order/Order to Surrender Weapons* should be modified/terminated **because**:

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The *Sexual Assault Protection Order/Order to Surrender Weapons* should be changed as follows:

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

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

\_\_\_\_\_  
Signature of Moving Party

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Signature of Moving Party Filing on  
Behalf of Petitioner

\_\_\_\_\_  
Print or Type Name

**This document must be served on the other party, and a  
Return of Service must be filed with the court clerk at or before the hearing.**

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**Statement:** (Continued) \_\_\_\_\_  
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\_\_\_\_\_.

(Continue on separate page if necessary)

I certify 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

**BAINBRIDGE ISLAND MUNICIPAL COURT**  
**Kitsap County, Washington**

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Email: court@bainbridgewa.gov

\_\_\_\_\_  
Petitioner (Protected Person)          DOB  
vs.

\_\_\_\_\_  
Respondent (Restrained Person)          DOB

No.

**Finding of Adequate Cause and Order  
for Hearing on Respondent's Motion to  
Modify/Terminate Sexual Assault  
Protection Order  
(ORRACG / ORH)  
(Optional Use)**  
 Clerk's Action Required

**To: The Respondent and Petitioner:**

The respondent filed a motion to modify (change)/terminate the:

- Sexual Assault Protection Order, filed on (date): \_\_\_\_\_.
- Order to Surrender Weapons, filed on (date): \_\_\_\_\_.

The court considered the respondent's motion, petitioner's declaration/s opposing the motion, if any, and relevant parts of the court record, and finds adequate cause to hear the motion:

- Sexual Assault Protection Order, as follows (check all that apply):
  - All provisions
  - Provision 1: No contact
  - Provision 2: Exclude from places
  - Provision 3: Stay away
  - Provision 4: other (specify): \_\_\_\_\_.
  - Provision 5: School transfer
  - Prohibit Weapons and Order Surrender
- Order to Surrender Weapons.

A hearing is set for \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m.  
*date* *time*

at: Bainbridge Island Municipal Court, 10255 NE Valley Road, Bainbridge Island, WA 98110

**Respondent:** You must arrange to have someone else over the age of 18 personally serve the petitioner with a copy of the *Motion to Modify/Terminate Sexual Assault Protection Order* and this order not less than 5 days before the hearing. You must also file a Return of Service with the court clerk at or before the hearing.

**Petitioner:** If you do not appear at the hearing, the court may enter an order without hearing from you. For information about how to respond, see the box below.

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Date

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Judge or Commissioner

**To the Petitioner:**

If you do not agree with the requests in the motion, file a statement (using form SA 8.070 *Declaration*) explaining why the court should not approve those requests. You may file other written proof supporting your side.

**To both parties:**

**Deadline!** Your papers must be filed and served by the deadline in your county's Local Court Rules or by the State Court Rules if there is no local rule. Court Rules and forms are online at [www.courts.wa.gov](http://www.courts.wa.gov).

If you want the court to consider your side, you **must**:

- File your original documents with the Superior Court Clerk; AND
- Give the Judge/Commissioner a copy of your papers (if required by your county's Local Court Rules); AND
- Have a copy of your papers served on all other parties or their lawyers; AND
- Go to the hearing.

**Bring proposed orders to the hearing.**

<b>BAINBRIDGE ISLAND MUNICIPAL COURT Kitsap County, Washington</b>	<b>Mail: PO Box 151, Rollingbay, WA 98061</b> Location: 10255 NE Valley Rd, Bainbridge Island, WA Phone # 206-842-5641 Fax # 206-842-0316 Email: court@bainbridgewa.gov
_____ Petitioner (Protected Person)                  DOB vs.	<b>No.</b>  <b>Order Setting Hearing (ORH)</b> (Optional Use)  <input type="checkbox"/> Clerk's Action Required
_____ Respondent (Restrained Person)                  DOB	

**To: the petitioner and respondent:**

**1. The petitioner filed a:**

- Motion and Declaration for Renewal of Sexual Assault Protection Order.*
- Motion to Modify/Terminate a Sexual Assault Protection Order.*

**2. The court sets a hearing. The parties shall appear on:**

\_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m.  
*date* *time*

at: BAINBRIDGE ISLAND MUNICIPAL COURT, 10255 NE Valley Road, Bainbridge Is., WA  
*court's address*

At the hearing, the court will decide whether or not to grant the petitioner's motion.

**3. For Renewal Motions only:**

***Warning to Respondent!*** The court will grant the motion if you do not prove by a preponderance of the evidence that there has been a material change of circumstances as described in RCW 7.90.121.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Judge or Commissioner**

**Petitioner: You must arrange for someone else over the age of 18 to serve a copy of this order and the motion on the other party. A Return of Service must be filed with the court clerk at or before the hearing.**