

<p align="center">BAINBRIDGE ISLAND MUNICIPAL COURT Kitsap County, Washington</p>	<p>Mailing Address: PO Box 151, Rollingbay, WA 98061 Location Address: 10255 NE Valley Rd, Bainbridge Is., WA Phone # 206-842-5641 Fax # 206-842-0316 www.bainbridgewa.gov email: court@bainbridgewa.gov</p>
<p>_____, Petitioner, vs. _____, Respondent.</p>	<p>No. Declaration of Non-Surrender (DCLRNS)</p>

Note: If you previously surrendered your firearms, other dangerous weapons, and concealed pistol licenses, use the Proof of Surrender form, All Cases 03.0400, or NC 03.0400.

I understand that the court has ordered me to surrender all firearms, and other dangerous weapons that I own or have in my possession or control, and any concealed pistol licenses. I have not surrendered any firearms, other dangerous weapons, or concealed pistol licenses pursuant to that order because I do not have any of those items.

I also understand that:

I am prohibited from accessing, obtaining, or possessing firearms, other dangerous weapons, or concealed pistol licenses until further order of the court.

If I fail to comply with the order to surrender weapons (and prohibit weapons, if applicable), I may be found in contempt of court and be charged with a misdemeanor.

I may be charged with a crime up to and including a **felony** if I am found to own, possess, or control a firearm or other dangerous weapon.

I declare, under penalty of perjury under the laws of the State of Washington, that this statement is true and correct.

Dated: _____ at (place) _____, Washington.

 Signature of Restrained Person

 Print name