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Instructions for Petition for Order for Protection

This form is used to start a domestic violence protection order case. Ask the court clerk for advocate services to help you fill out this form. This form will be:

- Filed as a public court record and will start a civil court case.
- Served (personal delivery) to the person from whom you need protection.

The information in the petition is^{*} used by the court to determine if:

- The court has authority to enter an order on your behalf.
- If the relationship between you and the other party meets the legal definition of family or household member.
- If the respondent's behavior towards you meets the legal definition of domestic violence.

This is a two step process. This form is used to request both immediate temporary protection **And** full protection. If you need immediate protection, and the court finds an emergency exists, the court may immediately issue a temporary order that will last until the court holds a hearing, usually within 14 days. During the 14 days, you must arrange for service on the respondent of the petition, temporary order and notice of hearing, and any other declarations or documents, if any, presented to the court. Service may be done by a law enforcement agency where the respondent lives or works, a hired professional process server, or a person 18 or over who is not a party to this action. The person completing service on the respondent must file an affidavit, declaration, or certificate of service with the court or the hearing cannot go forward. At the hearing, the court will determine if it should issue a full Order for Protection. The respondent has a right to attend that hearing.

Please Print Clearly Using Black or Blue Ink!

Top of the form (Page 1)

Fill in your name (first, middle initial, last) as the "Petitioner." The person you want protection from is the "Respondent." Fill in the respondent's name (first, middle initial, last).

Who Needs Protection (Question 1)

The court must know who needs protection. Check the first box if you need protection. Check the second box if someone in your family or household needs protection. You may check both boxes. Check the third box if you are the guardian, guardian ad litem or next friend of a minor 13 – 15 years of age who is a victim of domestic violence in a dating relationship with a person 16 years of age or older, who needs protection. Include the minor's name in the space provided within the third check box and provide additional identifying information for the minor in paragraph 5.

A next friend is a competent person, over 18 years of age, chosen by the minor who is capable of pursuing the minor's stated interest in the petition for order for protection action.

Residency (Question 2)

Check the box that applies.

Age (Question 3)

The court needs to know the ages of the petitioner/victim and the respondent. Check **One** of the boxes for the petitioner's/victim's age. Check **One** of the boxes for the respondent's age.

Relationship (Question 4)

The court must know the relationship between the petitioner/victim and the respondent. Check all the boxes that describe your situation. If you are petitioning on behalf of a minor, the minor's relationship to the respondent is addressed in question 5.

Identification of Minors (Question 5)

- If there are no children, check the box indicating "No Minors Involved."
- If there are children, list each child's name, age, race and sex. Fill in how that child is related to you (for example, son, stepdaughter). Fill in how that child is related to the respondent. Fill in with whom that child lives (for example: me, grandparent, respondent).
- If you have questions about safety for your children, ask for advocate resources for help in filling out this section.

Court Cases (Question 6)

This may not be the first court proceeding involving you, or the minors, and the respondent. The court will need to know about other cases, such as divorce, parentage or criminal, or other restraining, protection or no-contact orders so the court does not issue an order that might conflict with an order from another court.

If there are other cases or orders involving you, or the minors, and the respondent, list the case title (the parties' names), the case number (if you know it), and the court (district, municipal, or superior) and the county in the columns provided.

Request for Protection (Page 2)

In this section, you must tell the court what you want the court to order now and after the hearing (the relief requested). The court can only grant the relief you request in the petition.

- To request relief beginning today and lasting until the hearing, check the boxes on the left under "Temp."
- To request relief you want in the full order issued at the hearing, check the boxes on the left under "Full."

Some provisions allow you to ask the court to protect you, all the minors listed in paragraph 5 or only minors you name. Some provisions allow you to specify which locations you want included in the

protection. Be sure to check the boxes to specify which people and places you want protected within each restraint provision.

1. The first provision asks the court to **restrain** the respondent from causing physical harm, or from stalking or harassing you and/or the children you name.
2. The second provision asks the court to restrain the respondent from harassing, following, keeping under surveillance, including cyberstalking, or from using telephonic, audiovisual or other electronic means to monitor the actions, locations or communications of you and/or the minors listed in paragraph 5, only the minors you name in this provision. You may also ask for protection in this provision for the victim's adult children and/or any of the victim's household members. Write in the names of the adult children or household members in the space provided.
3. The third provision asks the court to **restrain** the respondent from contacting you and/or the children you name.
4. The fourth provision asks the court to **exclude** the respondent from your home, workplace, school or the minor's day care or school. If there is someplace else you want to include, add it to the box called "other."

You have a right to keep your residential address confidential (secret). This restraint provision in the temporary order and in the full order has a space for you to write in your residential address. You are not required to write in your residential address if you are concerned with your safety or with identity theft. However, enforcement of the order may be easier if your address is included. If you decide to include your address, please list the complete address, including the city.

5. The fifth provision asks the court to order the respondent to **vacate** the home the two of you share and to give you exclusive rights to the home.
6. The sixth provision asks the court to **prohibit** the respondent from knowingly coming within or knowingly remaining within a specified distance (e.g. 100 feet, 2 blocks) of your home, workplace or school; or the minor's day care or school. If there is someplace else you want to include, add it to the box called "other."
7. The seventh provision asks the court to **grant** you possession of essential personal belongings. Please list the personal belongings. ("Essential personal belongings" means those items necessary for a person's immediate health, welfare, and livelihood. "Essential personal belongings" includes but is not limited to clothing, cribs, bedding, documents, medications, and personal hygiene items. (RCW 26.50.010(7).)
8. The eighth provision asks the court to **grant** you use of a vehicle (i.e., blue 1994 Ford Taurus, License Number XYZ123).
9. The ninth provision, "**Other**," is where you may list something not mentioned in the above provisions.

Provisions 10, 11, 12, 13, 14, and 15 are only available as part of the Full Order:

10. The tenth provision asks the court to **direct** the respondent to get treatment or counseling.

11. The eleventh provision asks the court to **require** the respondent to pay the fees and costs of this action. (Fees and costs may include court costs, service fees and reasonable attorney's fees.)
12. The twelfth provision asks the court to make the order **remain effective** (last longer) than one year. Check this box only if there is reason to believe the respondent would resume the acts of domestic violence against you if the order expired in one year.
13. The thirteenth provision asks the court to **grant** you exclusive custody and control of pet(s). You can only ask for custody and control of a pet if it is owned, possessed, leased, kept, or held by you, the respondent, or a minor child residing with either you or the respondent.
14. The fourteenth provision asks the court to **prohibit** the respondent from interfering with your efforts to remove the pet(s).
15. The fifteenth provision asks the court to **prohibit** the respondent from knowingly coming within or knowingly remaining within a specified distance (e.g. 100 feet, 2 blocks) from the location(s) you list where the pet(s) may regularly be found. Remember, you have a right to keep your residential address confidential.

If There Are No Minors Involved Do Not Check Provisions 16, 17, and 18.

If You Are Requesting Restraint Provisions Involving Minors Check the Boxes in 16, 17 and 18.

16. The sixteenth provision asks the court to **grant** (give) you the temporary care, custody and control of the children you name.
17. The seventeenth provision asks the court to **restrain** the respondent from interfering with your custody of the children you name.
18. The eighteenth provision asks the court to **restrain** the respondent from removing the listed children from the state.

Please review the section you just completed to ensure that you checked the boxes to show which provisions you want in temporary, full or both orders. In each provision, be sure you checked the boxes to identify the people and places you want protected.

Request for Special Assistance From Law Enforcement Agencies

You might need special help from the police. Check off everything that you think you may need the police to assist you in obtaining.

1. The first item asks the court to order the police to help you get back into your home. For your safety, ask for a police escort back into your home.
2. The second item asks the court to order the police to help you get use of the vehicle.

3. The third item asks the court to order the police to help you get your personal belongings (Civil Standby). Check the box if you want the police to help you get your belongings from the shared residence, the respondent's residence or another location. Because of time limitations, availability of officers and safety, contact law enforcement to schedule a civil standby (when they will meet you and how long they can stay).
4. The fourth item asks the court to order the police to help you get custody of the children you list. There may be additional steps that you have to take for this request to be enforced.
5. The last item lets you ask for other help you might need from the police.

Statement of Petitioner

The statement of petitioner is to describe to the court why a protection order is needed. This document will be filed in the court file, which is a public record, and shall be served on the respondent. If you do not include a particular incident of domestic violence in your statement, you may not have an opportunity to tell the court at the hearing.

“Domestic violence” means physical harm, bodily injury, assault, including sexual assault, stalking, Or inflicting fear of imminent physical harm, bodily injury or assault between family or household members.

First read through the statement section in the petition before you start writing. There are several places for you to describe what happened.

Describe exactly what happened when you were threatened or hurt. Provide as much detail as you can such as dates, times, witnesses, injuries, if any, medical treatment, if any. The more details you can provide the more helpful it is to the judge. If there is an emergency, explain why so the court can issue an immediate temporary order before the hearing. In addition to the information requested in the statement you may want to include:

- If the respondent has hurt other people.
- If the respondent has been arrested.
- If police responded even if no arrests were made.

Examples:

It is better to say “On Sunday, January 12, at 2:00 a.m., Terry slapped my face.” Rather than “On Sunday Terry assaulted me.”

It is better to say “Terry threatened to kill me if I left the house. He said ‘You leave and I will kill you.’” Rather than “Terry threatened me.”

It is better to say “Terry drives by me while I’m waiting at the bus stop after work every Monday evening.” Rather than “Terry is stalking me.”

It is better to say "Terry sends me emails or text messages [include number] times a day. I texted Terry to stop; but Terry keeps sending the messages." Rather than "Terry cyber stalks me."

Try to use the respondent's exact words when you were threatened with physical harm.

If any of the information requested does not apply, write, "does not apply" in that section.

Choose the appropriate box if substance abuse is involved.

Out of State Service

If the respondent cannot be personally served in Washington State, check the box. Note: The respondent will still have to be personally served, unless the court orders otherwise.

Sign the Form

When you are done with your statement, put today's date in the date line and fill in the city where you are completing this form. Sign the form.

The respondent has a right to have you served with documents in response to this petition. You have a right to keep your residential address confidential. If you want to keep your address confidential, you must list an address that is not your residential address where you agree to accept legal documents.

Law Enforcement Information Sheet (LEIS)

You must complete a Law Enforcement Information Sheet (LEIS), form WPF All Cases 01.0400. This form is confidential and it does not go in the public court file and is not served on the respondent.

- It is used by Law Enforcement to locate and identify the respondent when serving documents.
- It is also used by Law Enforcement when entering the order in the state-wide data base.

Complete as much information as possible, especially, first name, middle initial, last name, and date of birth.

If the respondent has a disability, brain injury, or other impairment, you may know of special assistance that law enforcement could provide when serving the documents. For example:

"Respondent has a brain injury. If respondent is rushed, respondent may freeze up and may not respond quickly, or may become verbally aggressive. Remind respondent to contact a friend."

"Respondent has epilepsy and diabetes and may have seizures when stressed. Respondent doesn't respond well to being rushed and will need time to get meds and supplies."

**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

vs.

Respondent

No.

**Petition for Order for Protection
(PTORPRT)**

1. I am a victim of domestic violence committed by the respondent.
 A member of my family or household is a victim of domestic violence committed by the respondent.
 I am a guardian guardian ad litem next friend of a minor who is 13 to 15 years of age and is a victim of domestic violence in a dating relationship with a person age 16 or older. The name of the minor victim is _____.
This person's identifying information is provided in paragraph 5 below.

2. The victim lives in this county.
 The victim left their residence because of abuse and this is the county of their new or former residence.

3. The victim's age is: Respondent's age is:
 Under 16 16 or 17 18 or over Under 16 16 or 17 18 or over

4. The victim's relationship with the respondent is:
- | | | |
|--|---|--|
| <input type="checkbox"/> spouse or former spouse | <input type="checkbox"/> current or former dating relationship | <input type="checkbox"/> in-law |
| <input type="checkbox"/> parent of a child in common | <input type="checkbox"/> stepparent or stepchild | <input type="checkbox"/> parent or child |
| <input type="checkbox"/> current or former domestic partner | <input type="checkbox"/> current or former cohabitant as roommate | <input type="checkbox"/> blood relation other than parent or child |
| <input type="checkbox"/> current or former cohabitant as part of a dating relationship | | |

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:

Case Name			
Case Number			
Court/County			

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

<p>¹ <input type="checkbox"/> Restrain respondent from causing any physical harm, bodily injury, assault, including sexual assault, and from molesting, harassing, threatening, or stalking <input type="checkbox"/> me <input type="checkbox"/> the minors named in paragraph 5 above <input type="checkbox"/> these minors only:</p> <p>(If the court orders this relief, and the respondent is your spouse or former spouse, current or former domestic partner, the parent of a child in common, or a current or former cohabitant as part of a dating relationship, the respondent will not be able to obtain or possess a firearm, other dangerous weapon, ammunition, or concealed pistol license under state or federal law for the duration of the order.)</p>
<p>² <input type="checkbox"/> 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 <input type="checkbox"/> me <input type="checkbox"/> the minors named in paragraph 5 above <input type="checkbox"/> only the minors listed below; <input type="checkbox"/> members of the victim's household listed below <input type="checkbox"/> the victim's adult children listed below:</p>
<p>³ <input type="checkbox"/> 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 <input type="checkbox"/> me <input type="checkbox"/> the minors named in paragraph 5 above, subject to any court-ordered visitation <input type="checkbox"/> these minors only, subject to any court-ordered visitation:</p>

⁴ **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.

⁵ **Direct** respondent to vacate our shared residence and restore it to me.

⁶ **Prohibit** respondent from knowingly coming within, or knowingly remaining within
_____ (distance) of our shared residence my residence my
workplace my school the day care or school of the minors named in paragraph
5 above. these minors only:

 other:

⁷ **Grant** me possession of essential personal belongings, including the following:

⁸ **Grant** me use of the following vehicle:
Year, Make & Model _____ License No. _____

⁹ **Other:**

Protection involving a minor

¹⁰ Subject to any court-ordered visitation, **Grant** me the care, custody and control of the
minors named in paragraph 5 above these minors only:

¹¹ **Restrain** respondent from interfering with my physical or legal custody of the minors
named in paragraph 5 above these minors only:

¹² **Restrain** the respondent from removing from the state: the minors named in
paragraph 5 above these minors only:

Additional Requests:

¹³ **Direct** the respondent to participate in appropriate treatment or counseling services.

¹⁴ **Require** the respondent to pay the fees and costs of this action.

¹⁵ **Remain Effective** longer than one year because respondent is likely to resume acts of
domestic violence against me if the order expires in a year.

Protection involving pets.

¹⁶ **Grant** 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.):

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 any firearm or other dangerous weapon, or any concealed pistol license, and prohibit the respondent from obtaining or possessing a firearm or other dangerous weapon, or a concealed pistol license.

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 license.

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 of a firearm or other dangerous weapon 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?

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):

Other: _____

"Domestic violence" means physical harm, bodily injury, assault, including sexual assault, stalking, Or inflicting fear of imminent physical harm, bodily injury or assault between family or household members.

Statement: The respondent has committed acts of domestic violence as follows. (Describe specific acts of domestic violence and their approximate dates, beginning with the most recent act. You may want to include police responses.)

Describe the most recent violent act, fear or threat of violence, and why the temporary order should be entered today without notice to the respondent: _____

Describe the past incidents where you experienced violence, where you were afraid of injury or where the respondent threatened to harm or kill you: _____

Describe any violence or threats towards children: _____

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

Describe medical treatment you received and for what: _____

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

Does the respondent own or possess firearms? Yes No

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

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

Has the respondent previously committed an offense that makes him or her ineligible to possess a firearm under the provisions of RCW 9.41.040? Please describe:

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 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

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: _____

CHILD CUSTODY INFORMATION SHEET NO: _____

If you are seeking protection for your child(ren) from domestic violence or are requesting custody of your child(ren), please answer the questions and provide the information requested in paragraphs A –E below and check the boxes about the court's jurisdiction that apply to your case:

Information for the courts:

A. Do the child(ren) listed in Paragraph 5 of the petition currently live with you? If not, with whom do the child(ren) currently live?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
B. Do you know of <u>any</u> other court cases involving the child(ren)? If known, list: the court the case number the kind of case _____ _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Have you been involved in <u>any</u> other litigation concerning custody or visitation with the child(ren) in this or any other state? If known, list the court, the case number and the date the parenting plan, residential schedule, visitation schedule or custody decree was entered: the court the case number the date _____ _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
D. Do you know of any persons, other than you and the respondent, who claims rights of custody or visitation with, the child(ren)? If known, list their names in the space provided below and their present addresses in the Confidential Information Form: Name _____ Name _____ Name _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
E. List the places where the children have lived during the past five years, the dates they lived there and the persons with whom they lived. (The present addresses of those persons must be listed in the required Confidential Information Form.) _____ _____		

Jurisdiction:

This court has jurisdiction over this proceeding for the reasons below: [Check all the boxes that apply to your case.]	
<input type="checkbox"/>	This court has exclusive continuing jurisdiction. The court has made a child custody, parenting plan, residential schedule or visitation determination in this matter before and retains jurisdiction under RCW 26.27.211.

<input type="checkbox"/>	<p>This state is the home state of the children because:</p> <ul style="list-style-type: none"> <input type="checkbox"/> the children lived in Washington with a parent or a person acting as a parent for at least six consecutive months immediately before the beginning of this proceeding. <input type="checkbox"/> the children are less than six months old and have lived in Washington with a parent or a person acting as parent since birth. <input type="checkbox"/> any absences from Washington have been only temporary. <input type="checkbox"/> Washington was the home state of the children within six months before the beginning of this proceeding and the children are absent from the state; but a parent or person acting as a parent continues to live in this state.
<input type="checkbox"/>	<p>The children and the parents, or the children and at least one parent or a person acting as a parent, have significant connections with this state other than mere physical presence; and substantial evidence is available in this state concerning the children's care, protection, training and personal relationships and</p> <ul style="list-style-type: none"> <input type="checkbox"/> the children have no home state elsewhere. <input type="checkbox"/> the children's home state has declined to exercise jurisdiction on the ground that this state is the more appropriate forum under RCW 26.27.261 or 271.
<input type="checkbox"/>	<p>All courts in the children's home state have declined to exercise jurisdiction on the ground that a court of this state is the more appropriate forum to determine the custody of the children under RCW 26.27.261 or .271.</p>
<input type="checkbox"/>	<p>No other state has jurisdiction.</p>
<input type="checkbox"/>	<p>This court has temporary emergency jurisdiction over this proceeding because the children are present in this state and the children have been abandoned, or it is necessary in an emergency to protect the children because the children, or a sibling or parent of the children is subjected to or threatened with abuse. RCW 26.27.231.</p>

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

Dated _____ at _____, Washington

Petitioner

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

Mail Addr: PO Box 151, Rolling Bay, WA 98061
Location: 10255 NE Valley Rd, Bainbridge Island, WA
Phone # 206-842-5641 Fax # 206-842-0316

Petitioner

Minor(s)
Vs.

Respondent(s)

Minor(s)

NO:

**PETITION FOR APPOINTMENT AS
GUARDIAN AD-LITEM FOR MINORS**

Comes now the above named petitioner and requests the court to appoint petitioner
 respondent as guardian ad-litem for the above minor(s) who are not competent to commence or defend
the action herein because said minor(s) are under the age of eighteen (18).

This petition is brought for the purpose of domestic violence other _____

Dated this _____ day of _____, 20_____.

Petitioner

The above named petitioner disposes and says:

- I am applying to be appointed to be the guardian ad-litem for the above named persons in this action because they are under the age of eighteen (18) and I am the _____ of the minor(s).
state nature of relationship to minor(s)
- I am applying for an order requesting the above named respondent be appointed as guardian ad-litem for the above named minor(s) and believe respondent is the _____ of the minor(s).
state nature of relationship to minor(s)

I know and have independently reviewed the facts upon which the minor(s) are claiming relief and believe them to be true, and that the action commenced or defense asserted is justifiable.

I certify under penalty of perjury under the laws of the State of Washington that the statements made herein are true to the best of my knowledge and belief.

Signed at _____, Washington on the _____ day of _____, 20_____.

Petitioner

**FILL OUT MOTION TO SURRENDER WEAPONS
ONLY IF YOU ARE REQUESTING THAT THE
RESPONDENT BE REQUIRED TO SURRENDER
FIREARMS AS A PART OF THIS CIVIL
PROTECTION ORDER.**

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

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

Petitioner _____ DOB _____

vs.

Respondent _____ DOB _____

No.

**Motion for Surrender of Weapons
(MT)**

1. I am requesting or protected by a civil protection order in the above cause number:
 Domestic Violence, Ch. 26.50 RCW Anti-harassment, Ch. 10.14 RCW
 Sexual Assault, Ch.7.90 RCW Stalking, Ch. 7.92 RCW
2. The restrained person (name) _____ has: (check all that apply and attach additional information if necessary)

- used, displayed, or threatened to use a firearm or other dangerous weapon in a felony.

Describe this offense:

- previously committed an offense that makes him or her ineligible to possess a firearm under the provisions of RCW 9.41.040. Describe this offense:

- possession of a firearm or other dangerous weapon which presents a serious and imminent threat to public health or safety, or to the health or safety of any individual. My concern for imminent threat is based on the following:

3. Information about the firearms or other dangerous weapon/s:

What kind of firearm or other dangerous weapon?	Where is it located?

4. My relationship with the restrained person is:
- | | | |
|--|--|--|
| <input type="checkbox"/> spouse or former spouse | <input type="checkbox"/> current or former dating relationship | <input type="checkbox"/> in-law |
| <input type="checkbox"/> parent of a child in common | <input type="checkbox"/> stepparent or stepchild | <input type="checkbox"/> parent or child |
| <input type="checkbox"/> current or former domestic partner | <input type="checkbox"/> current or former cohabitant as part of a dating relationship | <input type="checkbox"/> blood relation other than parent or child |
| <input type="checkbox"/> current or former cohabitant as part of a dating relationship | <input type="checkbox"/> current or former roommate | |

5. I request that the court:

- Prohibit the restrained person from obtaining or possessing a firearm or other dangerous weapon, or a concealed pistol license.
- Require the restrained person to surrender any firearm, other dangerous weapon, and any concealed pistol license issued under RCW 9.41.070.
- Order temporary surrender of a firearm or other dangerous weapon without notice to the restrained person because irreparable injury could result if an order is not issued until the time for response has elapsed.

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

Dated: _____ at (place) _____, Washington.

Signature of Protected Person/Attorney WSBA No. Print Name

Confidential Information Form (INFO)

County: KITSAP	Cause Number:	Do not file in a public access file.
Court Clerk: This is a Restricted Access Document		

Divorce/Separation/Invalidity/Nonparental Custody/Paternity/Modifications
 Sexual Assault
 Other
 Domestic Violence
 Antiharassment
 Information Change (Check if you are updating information)

A restraining order or protection order is in effect protecting the petitioner the respondent the children.

The health, safety, or liberty of a party or child would be jeopardized by disclosure of address information because: _____

The following information about the parties is required in all cases:
 (Use the Addendum To Confidential Information Form to list additional parties or children)

Petitioner Information	Type or Print Only	Respondent Information						
Name (Last, First, Middle)		Name (Last, First, Middle)						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">Race</td> <td style="width: 25%; text-align: center;">Sex</td> <td style="width: 50%; text-align: center;">Birth date</td> </tr> </table>	Race	Sex	Birth date		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">Race</td> <td style="width: 25%; text-align: center;">Sex</td> <td style="width: 50%; text-align: center;">Birth date</td> </tr> </table>	Race	Sex	Birth date
Race	Sex	Birth date						
Race	Sex	Birth date						
Driver's Lic. or Identocard (# and State).		Driver's Lic. or Identocard (# and State), (or, if unavailable, residential address)						
Mailing Address (P.O. Box/Street, City, State, Zip)		Mailing Address (P.O. Box/Street, City, State, Zip)						
Relationship to Child(ren)		Relationship to Child(ren)						

The following information is required if there are children involved in the proceeding. (Soc. Sec. No. is not required for petitions in protection order cases (Domestic Violence/Antiharassment/Sexual Assault.)

1) Child's Name (Last, First, Middle)
Child's Race/Sex/Birth date
Child's Soc. Sec. No. (If required)
Child's Present Address or Whereabouts

2) Child's Name (Last, First, Middle)
Child's Race/Sex/Birth date
Child's Soc. Sec. No. (If required)
Child's Present Address or Whereabouts
List the names and present addresses of the persons with whom the child(ren) lived during the last five years:
List the names and present addresses of any person besides you and the respondent who has physical custody of, or claims rights of custody or visitation with, the child(ren):

Except for petitions in protection order cases (Domestic Violence/Antiharassment/ Sexual Assault), the following information is required:	
Petitioner's Information	Respondent's Information
Soc. Sec. No.:	Soc. Sec. No.:
Residential Address (Street, City, State, Zip)	Residential Address (Street, City, State, Zip)
Telephone No.: ()	Telephone No.: ()
Employer:	Employer:
Empl. Address:	Empl. Address:
Empl. Phone No.: ()	Empl. Phone No.: ()
For Nonparental Custody Petitions only, list other Adults in Petitioner(s) household (Name/DOB):	

Additional information: _____

Addendum(s) To Confidential Information Form attached. List other parties or children in Addendum(s).

I certify under penalty of perjury under the laws of the state of Washington that the above information is true and accurate concerning myself and is accurate to the best of my knowledge as to the other party, or is unavailable. The information is unavailable because _____

Signed on _____ [Date] at _____ [City and State].

 Petitioner/Respondent

Addendum to Confidential Information Form (AD)

County: KITSAP	Cause Number:	Do not file in a public access file.
Court Clerk: This is a Restricted Access Document		

The following information about additional parties is required in all cases.

Additional Petitioner Information	Type or Print Only	Additional Respondent Information
Name (Last, First, Middle)		
Race Sex Birth date		
Drivers Lic. or Identicard (# and State)		
Mailing Address (P.O. Box/Street, City, State, Zip)		
Relationship to Child(ren)		
Name (Last, First, Middle)		
Race Sex Birth date		
Drivers Lic. or Identicard (# and State), (or, if unavailable, residential address)		
Mailing Address (P.O. Box/Street, City, State, Zip)		
Relationship to Child(ren)		

The following information is required if there are additional children involved in the proceeding (Soc. Sec. No. is not required for petitions in protection order cases (Domestic Violence/Antiharassment/Sexual Assault).)

3) Child's Name (Last, First, Middle)
Child's Race/Sex/Birth date
Child's Soc. Sec. No. (If required)
Child's Present Address or Whereabouts
4) Child's Name (Last, First, Middle)
Child's Race/Sex/Birth date
Child's Soc. Sec. No. (If required)
Child's Present Address or Whereabouts

Except for petitions in protection order cases (Domestic Violence/Antiharassment/Sexual Assault), the following information is required:

Additional Petitioner Information	Additional Respondent Information
Soc. Sec. No.:	Soc. Sec. No.:
Residential Address (Street, City, State, Zip)	Residential Address (Street, City, State, Zip)
Telephone No.: ()	Telephone No.: ()
Employer:	Employer:
Empl. Address:	Empl. Address:
Empl. Phone No.: ()	Empl. Phone No.: ()

LAW ENFORCEMENT INFORMATION

Do NOT serve or show this sheet to the restrained person!

Do NOT FILE in the court file. Give this form to law enforcement.

Type or print clearly! This completed form is required by law enforcement. This information is necessary to serve, enforce and enter your order into the state wide law enforcement computer. Fill in the following information as completely as possible.

Court:	Case Number:
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<input type="checkbox"/> Domestic Violence	<input type="checkbox"/> Dissolution/Separation/Invalidity/Nonparental Custody/Paternity
<input type="checkbox"/> Unlawful Harassment	<input type="checkbox"/> Vulnerable Adult
	<input type="checkbox"/> Sexual Assault

Restrained Person's Information (This is the person that you want the court to restrain.)

Name:	First	Middle	Last	Nickname	Relationship to Protected Person
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Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build
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Last Known Address				Phone(s) w/Area Code	Need Interpreter? Yes or No
Street:					Language:
City:		State:	Zip:		

Employer	Employer's Address	WORK Hours: Phone: ()
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Vehicle License Number	Vehicle Make and Model	Vehicle Color	Vehicle Year	Drivers License or ID number	State
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Does the restrained person have a disability, brain injury, or impairment requiring special assistance when law enforcement serves the order? No Yes. If yes, describe (continue on back, if needed):

Hazard Information Restrained Person's History Includes:

Involuntary/Voluntary Commitment Suicide Attempt or Threats

Assault Assault with Weapons Alcohol/Drug Abuse Other:

Weapons: Handguns Rifles Knives Explosives Other:

Location of Weapons: Vehicle On Person Residence Describe in detail:

Current Status (Circle Yes, No or N/A.) Is the restrained person a current or former cohabitant as an intimate partner? Y N
 Are you and the restrained person living together now? Y N Does the restrained person know he/she may be moved out of the home? Y N N/A
 Does the restrained person know you're trying to get this order? Y N Is the restrained person likely to react violently when served? Y N

Protected Person's Information (This is the person you want the court to protect.)

Name:	First	Middle	Last
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Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build
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If your information **is not confidential**, you must enter your address and phone number(s).

Current Address				Phone(s) w/Area Code	Need interpreter? Yes or No
Street:					Language:
City:		State:	Zip:		

If your information **is confidential**, you must provide the name, address and phone number of someone willing to be your "contact."

Contact Name	Contact Address	Contact Phone
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If you filed for someone else, list your name, phone number and address:

Minor's Information			Describe the minor's relationship using terms such as: child, grandchild, stepchild, nephew, none. →				Minor's Relationship to Protected/Restrained	
Name: First	Middle	Last	Sex	Race	Birth date	Resides With	Person	Person

Victim's Household Members or Adult Children Protected	Name:	birth date:
Name:	birth date:	Name:
		birth date:

IF YOU WOULD LIKE TO PRESENT STATEMENTS
FROM WITNESSES, USE THE ATTACHED
DECLARATION FORM.

MAKE COPIES IF YOU NEED STATEMENTS FROM
MORE THAN ONE WITNESS.

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

No. _____

Petitioner

vs.

Respondent

Declaration of _____ **(Name)**

(DCLR)
(Optional Use)
(Clerk's Action Required)

This declaration is made by:

Name: _____

Age: _____

Relationship to the parties in this action: _____

I declare,

