

STATE OF NORTH DAKOTA

IN THE DISTRICT COURT

COUNTY OF _____

_____ JUDICIAL DISTRICT

_____,)
)
 Petitioner,)
)
 vs.)
)
 _____,)
)
 Respondent.)

Civil No. _____

**PETITION FOR DOMESTIC VIOLENCE
PROTECTION ORDER**

STATE OF NORTH DAKOTA)
) ss:
 COUNTY OF CASS)

1. I, _____, being sworn, apply for protective relief under the Domestic Violence Chapter of the North Dakota Century Code, Ch. 14-07.1.

2. I am a resident of _____ County and currently live at *(optional)*:
_____.

3. I have _____ child(ren) living with me, whose name(s) and age(s) are:

	<i>Name</i>	<i>Age</i>	<i>Respondent's Child (yes/no)</i>
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____
4)	_____	_____	_____

4. I am asking the Court for protective relief from: _____.
(Please include full name)

5. This person is my: _____.

6. (His) (Her) place of residence is: _____
_____.

7. (He) (She) may also be found at: _____
_____.
8. (He) (She) is employed at: (name, address, telephone number of employer) ____

_____.
9. (He) (She) may be described as follows: Height _____ Weight _____ Age _____
DOB: _____
10. I want _____ (name of respondent) to be restrained from harassing, threatening, molesting, or injuring me.
11. I want _____ (name of respondent) to be restrained from having contact with me in person, by phone, by mail, or through third parties.
12. I want the respondent to be excluded from:
- 1) Petitioner's residence (*optional*) _____
 - 2) Petitioner's work (*optional*) _____
 - 3) Petitioner's day care (*optional*) _____
 - 4) Other (*optional*) _____
13. I want the respondent to be excluded from any place that I might be staying for a period of 30 days from this date: _____.
14. I (want) (do not want) parenting responsibility of my child(ren) at this time.
15. I (am) (am not) willing to grant respondent parenting time rights with regard to the children.

Parenting Time proposal: _____

_____.

_____.

22. The following is a listing of any civil or criminal actions involving both me and the person from whom I am seeking relief, as required by N.D.C.C. § 14-07.1-02.

_____.

I have read and understand the above statement, and to the best of my knowledge I believe that the facts stated above are true. I make this statement voluntarily.

Dated this _____ day of _____, _____.

Signature of Petitioner

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public/Clerk of District Court

Notary Commission Expires: _____