

**State of Washington
King County District Court**

Petitioner

vs.

Respondent

No.

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

- | | | | | | | | | | | | |
|---|---|--|--|--|---------------------------------|---|--|--|--|---|--|
| <p>1. <input type="checkbox"/> I am a victim of domestic violence committed by the respondent.
 <input type="checkbox"/> A member of my family or household is a victim of domestic violence committed by the respondent.
 <input type="checkbox"/> I am a <input type="checkbox"/> guardian <input type="checkbox"/> guardian ad litem <input type="checkbox"/> 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.</p> | | | | | | | | | | | |
| <p>2. <input type="checkbox"/> The victim lives in this county.
 <input type="checkbox"/> The victim left their residence because of abuse and this is the county of their new or former residence.</p> | | | | | | | | | | | |
| <p>3. The victim's age is:
 <input type="checkbox"/> Under 16 <input type="checkbox"/> 16 or 17 <input type="checkbox"/> 18 or over</p> | | <p>Respondent's age is:
 <input type="checkbox"/> Under 16 <input type="checkbox"/> 16 or 17 <input type="checkbox"/> 18 or over</p> | | | | | | | | | |
| <p>4. The victim's relationship with the respondent is:</p> <table border="0"> <tr> <td><input type="checkbox"/> spouse or former spouse</td> <td><input type="checkbox"/> current or former dating relationship</td> <td><input type="checkbox"/> in-law</td> </tr> <tr> <td><input type="checkbox"/> parent of a common child</td> <td><input type="checkbox"/> stepparent or stepchild</td> <td><input type="checkbox"/> parent or child</td> </tr> <tr> <td><input type="checkbox"/> current or former cohabitant as intimate partner, including current or former registered domestic partner</td> <td><input type="checkbox"/> current or former cohabitant as roommate</td> <td><input type="checkbox"/> blood relation other than parent or child</td> </tr> </table> | | | <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 common child | <input type="checkbox"/> stepparent or stepchild | <input type="checkbox"/> parent or child | <input type="checkbox"/> current or former cohabitant as intimate partner, including current or former registered domestic partner | <input type="checkbox"/> current or former cohabitant as roommate | <input type="checkbox"/> blood relation other than parent or child |
| <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 common child | <input type="checkbox"/> stepparent or stepchild | <input type="checkbox"/> parent or child | | | | | | | | | |
| <input type="checkbox"/> current or former cohabitant as intimate partner, including current or former registered domestic partner | <input type="checkbox"/> current or former cohabitant as roommate | <input type="checkbox"/> blood relation other than parent or child | | | | | | | | | |

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			

Check the box for each type of relief you are requesting, for each type of order you need.

Temp: I Request a **Temporary Order for Protection, effective until the hearing**, because **an Emergency Exists** as described in the statement below. A temporary protection order should be issued immediately without notice to the respondent, to avoid irreparable injury.

Full: I Request a **“full” Order for Protection**, following a hearing.

Temp	Full	
↓	↓	
<input type="checkbox"/>	<input type="checkbox"/>	<p>¹ 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, the parent of a common child, or a current or former cohabitant as intimate partner, including a current or former registered domestic partner, the respondent will be prohibited from possessing a firearm or ammunition under federal law for the duration of this order. An exception exists for law enforcement officers and military personnel when carrying department/government-issued firearms. 18 U.S.C. § 925(a)(1).)</p>
<input type="checkbox"/>	<input type="checkbox"/>	<p>² 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>

Temp ↓	Full ↓	Temporary Order, effective until a hearing. Full Order, effective following a hearing.
<input type="checkbox"/>	<input type="checkbox"/>	³ 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:
<input type="checkbox"/>	<input type="checkbox"/>	⁴ Exclude respondent from <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 residence, 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: You have a right to keep your residential address confidential.
<input type="checkbox"/>	<input type="checkbox"/>	⁵ Direct respondent to vacate our shared residence and restore it to me.
<input type="checkbox"/>	<input type="checkbox"/>	⁶ Prohibit 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:
<input type="checkbox"/>	<input type="checkbox"/>	⁷ Grant me possession of essential personal belongings, including the following:
<input type="checkbox"/>	<input type="checkbox"/>	⁸ Grant me use of the following vehicle: Year, Make & Model _____ License No. _
<input type="checkbox"/>	<input type="checkbox"/>	⁹ Other.
N/A	<input type="checkbox"/>	¹⁰ Direct the respondent to participate in appropriate treatment or counseling services.
N/A	<input type="checkbox"/>	¹¹ Require the respondent to pay the fees and costs of this action.
N/A	<input type="checkbox"/>	¹² 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.
Check the following only if you are requesting protection involving pets.		
N/A	<input type="checkbox"/>	¹³ 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.): _____.

N/A	<input type="checkbox"/>	¹⁴ Prohibit respondent from interfering with my efforts to remove the pet(s) named above.
N/A	<input type="checkbox"/>	¹⁵ Prohibit respondent from knowingly coming within, or knowingly remaining within _____ (distance) of the following locations where the pet(s) are regularly found: <input type="checkbox"/> petitioner's residence (You have a right to keep your residential address confidential.) <input type="checkbox"/> _____ Park <input type="checkbox"/> other: _____
Check the following only if you are requesting protection involving a minor:		
<input type="checkbox"/>	<input type="checkbox"/>	¹⁶ Subject to any court-ordered visitation, Grant me the care, custody and control of <input type="checkbox"/> the minors named in paragraph 5 above <input type="checkbox"/> these minors only:
<input type="checkbox"/>	<input type="checkbox"/>	¹⁷ Restrain 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:
<input type="checkbox"/>	<input type="checkbox"/>	¹⁸ Restrain the respondent from removing from the state: <input type="checkbox"/> the minors named in paragraph 5 above <input type="checkbox"/> these minors only:

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 incident or threat of violence and date:

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:

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: _____