

Petition for Order of Protection and Order for Hearing

Case # (the clerk fills this in):

In the _____ Court of _____ County, TN

Petitioner's name: (person needing protection)

(List Child's name if filed on behalf of person under 18 years of age pursuant to TCA §36-3-602)

first

middle

last

Check if Applicable:

Petitioner is under 18 and this Petition is being filed on behalf of an unemancipated person (someone under 18 years of age) pursuant to TCA §36-3-602. *This request is being made by _____ who is child's parent or legal guardian or a caseworker.*

This request is being made by a law enforcement officer pursuant to TCA §36-3-619. Person on whose behalf this Petition is filed consents in writing to the filing and signs here

➡ _____

****PETITIONER'S CHILDREN UNDER 18 THAT PETITIONER BELIEVES ARE IN NEED OF PROTECTION:**

Name	Age	Relationship to Respondent	Name	Age	Relationship to Respondent
1. _____			3. _____		
2. _____			4. _____		

Respondent's Information (person you want to be protected from):

_____ *first middle last date of birth (MM/DD/YYYY)*

_____ *street address city state zip*

Respondent's Employer: _____
Employer's name Employer's phone #

Describe Respondent:

Sex	Race	Hair	Eyes	Height – Weight – SSN – Other	
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Brown	Height	
	<input type="checkbox"/> Asian	<input type="checkbox"/> Grey	<input type="checkbox"/> Hazel	Weight	
	<input type="checkbox"/> Black	<input type="checkbox"/> Blond	<input type="checkbox"/> Blue	Social Sec. #	(Provided to Clerk's office if known) Do not list it here. XXXXXXXXXXXXXXXXXXXXXXXX
	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Bald	<input type="checkbox"/> Green	Scars/Special Features	
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Brown	<input type="checkbox"/> Gray	Phone Number	
		<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____		

① Check all of the following that apply to the Petitioner:

- a. We are married or used to be married.
- b. We live together or used to live together.
- c. We have a child together.
- d. We are dating, used to date, or have had sex.
- e. We are relatives, related by adoption, or are/were in-laws. (Specify): _____
- f. We are the children of a person whose relationship is described above (Specify): _____
- g. The Respondent has stalked me.
- h. The Respondent has sexually assaulted me.
- i. Other: _____

Warning!

- Weapon involved
- Has or owns a weapon



② List all children under 18 that you have:

* Check here if listing addresses would put you or your child in danger. If so, leave any spaces for addresses blank.

Name of Child	Age	Is Respondent the parent of the child? (Write "yes" or "no")	Does the child need to be protected from the Respondent?	Child's address

③ Where else have the children (that you and Respondent have together) lived during the last 6 months?

Children's previous addresses

Who did they live with at this address?

_____	_____
_____	_____
_____	_____
_____	_____

④ **Other Court Cases** – Is there any court, other than this court, in which the respondent and petitioner are parties to an action? (including cases in which the parties have children in common)

Yes No If "Yes," fill out below:

County and State
of other case: _____

Case Number
(if you know it): _____

Kind of case (check all that apply): Divorce Domestic Violence Criminal Juvenile Child Support

Other (specify): _____

⑨ **Personal Conduct**
 Please order the Respondent not to:
 Cause intentional damage to my property or interfere with the utilities at my home.
 Hurt or threaten to hurt any animals that I/we own or keep.

⑩ **Temporary Custody**
 Please give me temporary custody of our children.

⑪ **Child Support**
 Please order the Respondent to pay reasonable child support.

⑫ **Petitioner Support (if married)**
 Please order the Respondent to pay reasonable spousal support.

⑬ **Move-out / Provide other housing**
 Please order the Respondent to (*check one*): move out of our family home immediately
 or provide other suitable housing (if married)

 Check here if your home or lease is in the Respondent's name **only**.

 If the parties share a residence, please allow the Respondent to obtain his/her clothing and personal effects such as medicine and other things he/she may need.

⑭ **Counseling/Substance Abuse Programs**
 Please order the Respondent to go to a certified batterers' intervention program if one available in the area or a counseling program.

⑮ **No Firearms**
 Please order the Respondent not to have, possess, transport, buy, receive, use or in any other way get any firearm.
 List all firearms that you believe the Respondent owns, controls, or has access to:

Type of Firearm (Pistol, Rifle, etc.)	Location

⑯ **Animals / Pets**
 Please give me custody and control of any animal owned, possessed, leased, kept or held by me, the Respondent, or the children listed above.

⑰ **Costs, fees, and litigation taxes**
 Please order the Respondent to pay all court costs, lawyer fees, and taxes for this case.

⑱ **Transfer the billing responsibility for and rights to wireless telephone number(s)**
 Please issue an order directing _____, a wireless telephone service provider, to transfer the billing responsibility for and rights to the wireless telephone number or numbers of petitioner since petitioner is not the account holder.

Current account holder (name): _____

Billing telephone number: _____

New account holder (name): _____

All telephone numbers to transfer to new account holder:

Telephone number (include area code): _____

Telephone number (include area code): _____

Telephone number (include area code): _____

Telephone number (include area code): _____

Check box to include attachment with additional telephone number(s).

If the judge makes this order, you will be financially responsible for the transferred wireless telephone number or numbers, including the monthly service costs and costs of any mobile device associated with the wireless telephone number or numbers. You may be responsible for other fees. You must contact the wireless service provider to find out what fees you will be responsible for and whether you are eligible for an account.

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Other Orders: (General Relief) _____

I also ask the court to:

1. Make an immediate Temporary Order of Protection. (*Ex-Parte Order of Protection*)
2. Notify law enforcement in this county of that Order.
3. Serve the Respondent a copy of that *Order* and Notice of Hearing to take place within 15 days of service.
4. Serve a copy of the Request, Notice of Hearing and Temporary Order on the parents of the Petitioner (if the Petitioner is under 18 years of age) unless the Court finds that this would create a serious threat of serious harm to the Petitioner. *T.C.A. §36-3-605 (c)*

Petitioner (parent/legal guardian/caseworker/law enforcement personnel) signs below in front of a notary public and swears that he/she believes the above information is true:

➡ _____ Date: _____

Notary fills out below (TCA §36-3-602) –

I declare that the Petitioner has read this Petition, and swears it be true to the best of her/his knowledge.

Sworn and subscribed before me, the undersigned authority,

By (Print name of notary): _____

On this date: _____



Notary or Court Clerk or Judicial Officer signs here Date notary's commission expires

The court finds good cause and will issue a Temporary Order of Protection.

The court does not find good cause and denies a Temporary Order of Protection - The court finds there is no immediate and present danger of abuse to the petitioner and denies the Petitioner's request for a *Temporary Order of Protection*. The court will set the matter for hearing.

ORDER FOR HEARING

The Petitioner and Respondent must go to court and explain to the judge why the judge should or should not issue an Order of Protection against the Respondent.

This hearing will take place on (date): _____ at (time): _____ a.m. p.m.
at (location): _____

Judicial Officer's-signature Date _____

<p>Proof of Service of Petition, Notice of Hearing and Temporary Order of Protection: Respondent was served on (date): _____ at (time): _____ by (check one): <input type="checkbox"/> Personal service <input type="checkbox"/> U.S. Mail per TCA §§ 20-2-215 and 20-2-216 (The Respondent does not live in Tennessee.)</p> <p>_____ Server's signature</p> <p>_____ Print Name</p> <p>Petitioner was served on (date): _____ at (time): _____ by (check one): <input type="checkbox"/> Personal service</p> <p>_____ Server's signature</p> <p>_____ Print Name</p>	<p>If the Petitioner is under 18 (and Petitioner is a social worker filing on behalf of a minor) and service of these documents would not put him/her at risk, the Clerk will serve and fill out below. (TCA § 36-3-605(c))</p> <p><i>I served the child's parents of copies of the Petition, Notice of Hearing, and Temporary Order of Protection by personal delivery or U.S. Mail on: (date): _____ at (address): _____</i></p> <p>_____ Clerk's signature: _____</p>
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Notice to the Respondent about Firearms

If the court grants the Petitioner's request for a Protective Order:

- You will not be able to have a firearm while this or any later protective order is in effect. You will have to transfer all firearms in your possession within 48 hours to any person who is legally allowed to have them. *18 U.S.C. §922(g)(8), TCA §36-3-606(g), TCA §36-3-625.*
- You will not be allowed to buy a firearm until the court says otherwise.