

Case Number: _____ NCIC # _____ DPS # _____

Are you trying to change an Injunction Against Harassment that is in effect right now? Yes No
If yes, please enter the case number of the Injunction Against Harassment you are trying to modify. _____

WHO ARE YOU? (You will be known as the Plaintiff in this case)

Name: _____ Date of Birth: ____ / ____ / ____
first last

The court needs your contact information, so please complete the information below. If the person you need protection from (the defendant) does **NOT** know where you live, the court can hide your address so the defendant will not see it in your Injunction Against Harassment paperwork.

Does the person you need protection from know where you live? Yes No

WHERE DO YOU LIVE?

Street Address: _____ Suite/Apartment # _____
_____, Arizona _____
city zip code

Is this your residence, or the place where the court can contact you (friend's house, shelter, etc)?

Residence Contact

Would you like the court to **hide** this address so the defendant will not see it in your Injunction Against Harassment paperwork? Yes No

Home phone: (_____) _____ - _____ Work phone: (_____) _____ - _____

Cell phone: (_____) _____ - _____ Message phone: (_____) _____ - _____

Email: _____

WHO DO YOU NEED THE COURT TO KEEP AWAY FROM YOU? (The Defendant)

Please enter the following information on the person you need to be protected from (the Defendant). Enter as much information as you can on the person you need protection from because that will help law enforcement protect you better if you are granted an Injunction Against Harassment.

Name: _____ first middle last

Street Address: _____ Suite/Apartment # _____
_____, Arizona _____
city zip code

Defendant Phone: (_____) _____ - _____ Gender: Male Female Race: _____

Date of Birth: ____ / ____ / ____ This is an estimated date of birth

Height: _____ feet _____ inches Weight: _____ Eyes: _____ Hair: _____

Social Security #: _____ - _____ - _____ Driver's License #: _____ State: _____ Exp Date: _____

Does the defendant use any other name? Yes No _____

If YES, please provide defendant's other name:

Is the defendant currently a member of the military? Yes No

Is the defendant currently a member of law enforcement? Yes No

WHAT IS YOUR RELATIONSHIP TO THE DEFENDANT?

Check each check box that applies to the relationship.

My (Plaintiff's or child(ren)'s) relationship to the Defendant is (check all that apply):

- We are married. Date of marriage: _____ / _____ / _____
- We are divorced. Date divorce was granted: _____ / _____ / _____
- We are living together now or have lived together in the past.
- Dating but not a romantic or sexual relationship.
- One of us is pregnant by the other.
- We have a child in common.
- None of the above.

The defendant is either my spouse's or my: OR The defendant's spouse is my spouse or my:

- | | | | |
|--------------------------------------|--|--|---|
| <input type="checkbox"/> Parent | <input type="checkbox"/> Son | <input type="checkbox"/> Stepparent | <input type="checkbox"/> Stepson |
| <input type="checkbox"/> Grandparent | <input type="checkbox"/> Daughter | <input type="checkbox"/> Step grandparent | <input type="checkbox"/> Stepdaughter |
| <input type="checkbox"/> Brother | <input type="checkbox"/> Grandson | <input type="checkbox"/> Stepbrother | <input type="checkbox"/> Step grandson |
| <input type="checkbox"/> Sister | <input type="checkbox"/> Granddaughter | <input type="checkbox"/> Stepsister | <input type="checkbox"/> Step granddaughter |
| <input type="checkbox"/> Other _____ | | <input type="checkbox"/> None of the above | |

ARE THE COURTS INVOLVED IN THIS RELATIONSHIP?

Is an action for maternity, paternity, annulment, legal separation or dissolution of marriage (divorce) now pending between you and the defendant? No Yes

Case Number (if known): _____ Name of Court: _____

Have either you or the defendant been charged or arrested for domestic violence OR requested an Order of Protection or Injunction Against Harassment against the other? No Yes

Give date and name of court: Date: _____ / _____ / _____ Court: _____

List facts below:

WHY DO YOU NEED THIS PERSON TO STAY AWAY FROM YOU?

An Injunction Against Harassment is available if the conduct of any person is "harassment" as defined by Arizona law. The conduct can be any conduct which is harassment. Harassment is defined as a series of acts over any period of time that is directed at a specific person and that would cause a reasonable person to be seriously alarmed, annoyed or harassed and the conduct in fact seriously alarms, annoys, or harasses the person and serves no legitimate purpose (A.R.S. 12-1809(R)).

Date: ____/____/____ **OR** I think the following may happen:

Briefly describe what happened / or may happen:

Add additional acts of harassment **OR** acts you believe the defendant might commit:

Date: ____/____/____ **OR** I think the following may happen:

Briefly describe what happened / or may happen:

Add additional acts of harassment or acts you believe the defendant might commit:

Date: ____/____/____ **OR** I think the following may happen:

Briefly describe what happened / or may happen:

WHAT DO YOU WANT THE COURT TO ORDER?

I ask the Court to order the Defendant not to commit an act of domestic violence against me and/or persons named later in this request and/or against my property **AND** make the following Order(s) (check which Orders you want):

- Order the defendant not to possess and/or purchase firearms and/or ammunition.
- Order the defendant to surrender firearms and/or ammunition.
- Order the defendant to participate in domestic violence counseling or other counseling.

The Defendant may **only** contact me: by phone in writing electronically
 And / or by other means described below:

WHO ELSE NEEDS TO BE PROTECTED FROM THIS DEFENDANT?

Does anyone else need to be protected from this defendant? Yes No

The following person(s) should be included within the protection of this Order for the following reasons:
Include name and address if different than yours (do not include yourself). **If you do not want the defendant to know this person's address, check the Protect address check box.**

Name: _____ /_____/_____
first last date of birth

Street Address: _____
City Arizona ZIP Code Suite/Apartment #

Protected Address

Relationship to you: _____

Name: _____ /_____/_____
first last date of birth

Street Address: _____
City Arizona ZIP Code Suite/Apartment #

Protected Address

Relationship to you: _____

Name: _____ /_____/_____
first last date of birth

Street Address: _____
City Arizona ZIP Code Suite/Apartment #

Protected Address

Relationship to you: _____

Name: _____ /_____/_____
first last date of birth

Street Address: _____
City Arizona ZIP Code Suite/Apartment #

Protected Address

Relationship to you: _____

Name: _____ /_____/_____
first last date of birth

Street Address: _____
City Arizona ZIP Code Suite/Apartment #

Protected Address

Relationship to you: _____

