

Are you trying to change an Order of Protection that is in effect right now?  Yes  No

If yes, please enter the case number of the Order of Protection 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 Order of Protection 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 Order of Protection paperwork?  Yes  No

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
*area code number area code number*

Cell phone: \_\_\_\_\_ Message phone: \_\_\_\_\_  
*area code number area code number*

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 Order of Protection.

Name: \_\_\_\_\_  
*first middle last*

Street Address: \_\_\_\_\_ Suite/Apartment # \_\_\_\_\_  
\_\_\_\_\_, Arizona \_\_\_\_\_  
*city zip code*

Defendant Phone: \_\_\_\_\_ Gender:  Male  Female Race: \_\_\_\_\_  
*area code number*

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



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

The court may issue an Order of Protection if the defendant has already committed, or may commit an act of domestic violence against you or you minor child. Describe only acts of domestic violence, which have occurred within the past year. If the defendant was in jail or prison, you may describe that occurred immediately before they were placed in custody. You may also describe acts you believe the defendant might commit, including whether you fear bodily injury or death. Be as specific as possible, giving the date of each act of violence by the defendant.

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_    **OR**     I think the following may happen:

**Briefly describe what happened / or may happen:**

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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:**

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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:**

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**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: \_\_\_\_\_

