

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

_____)) Case No. _____ CI
PETITIONER (protected person), M F)
Birthdate: _____)
 Petitioner is a child. Who is signing for the child?)
Name: _____ Birthdate: _____)
Relationship to child: _____)
_____)) Case No. _____ CI
PETITIONER (protected person), M F)
Birthdate: _____)
 Petitioner is a child. Who is signing for the child?)
Name: _____ Birthdate: _____)
Relationship to child: _____)
_____)) Case No. _____ CI
PETITIONER (protected person), M F)
Birthdate: _____)
 Petitioner is a child. Who is signing for the child?)
Name: _____ Birthdate: _____)
Relationship to child: _____)
_____)) Case No. _____ CI
PETITIONER (protected person), M F)
Birthdate: _____)
 Petitioner is a child. Who is signing for the child?)
Name: _____ Birthdate: _____)
Relationship to child: _____)
_____)) Case No. _____ CI
PETITIONER (protected person), M F)
Birthdate: _____)
 Petitioner is a child. Who is signing for the child?)
Name: _____ Birthdate: _____)
Relationship to child: _____)
v.)
_____)) Case No. _____ CI
RESPONDENT (restrained person), M F)
Birthdate: _____)
 Respondent is a child. Who is signing for the child?)
Name: _____ Birthdate: _____)
Relationship to child: _____)
_____)

**PETITION FOR
DOMESTIC VIOLENCE
PROTECTIVE ORDER(S)
(MULTIPLE PETITIONERS)**

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b. Was a weapon involved? yes no (If yes, describe.)

c. Was anyone injured? yes no (If yes, describe.)

d. Has respondent been involved in other instances of domestic violence with petitioners or anyone else? yes no (If yes, describe.)

5. PROTECTIONS REQUESTED. (Check all that apply.)

a. Respondent not to threaten or commit acts of domestic violence, stalking, or harassment.

b. Respondent not to telephone, contact, or communicate in any other way, directly or indirectly, with petitioners. Exceptions where it would be safe for the respondent to contact petitioners:

- no exceptions by email to _____
 through an attorney by telephone to _____
 through a third person (such as a grandparent) named _____
 other _____

c. Respondent to leave and stay away from petitioners' residence at this street address:

Check this box if you want to keep this address confidential.

Does respondent live in this residence too? yes no

Does respondent know this address? yes no

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- d. Respondent to stay away from and not telephone or contact the following places that petitioner(s) or members of petitioners' household go to:

Place	Street Address	Distance to Stay Away
<input type="checkbox"/> Petitioner's school	_____	_____ <input type="checkbox"/> ft. <input type="checkbox"/> mi.
<input type="checkbox"/> Children's school	_____	_____ <input type="checkbox"/> ft. <input type="checkbox"/> mi.
<input type="checkbox"/> Place of employment	_____	_____ <input type="checkbox"/> ft. <input type="checkbox"/> mi.
<input type="checkbox"/> _____	_____	_____ <input type="checkbox"/> ft. <input type="checkbox"/> mi.
<input type="checkbox"/> _____	_____	_____ <input type="checkbox"/> ft. <input type="checkbox"/> mi.

Exceptions: _____

- e. Respondent not to enter, follow, or interfere with the operation of any vehicle occupied by one or more petitioner or in petitioners' possession.

- f. Respondent not to possess or use controlled substances.

- g. Award _____ temporary possession and use of the following, regardless of ownership:

(1) Residence located at _____ and everything in it.
 (street address)

(2) Vehicle and all keys to it. License plate number _____
 Vehicle Description _____

- (3) Essential personal items (check all that apply):

- | | | |
|---|--|--|
| <input type="checkbox"/> house keys | <input type="checkbox"/> garage door opener | <input type="checkbox"/> children's belongings |
| <input type="checkbox"/> mailbox keys | <input type="checkbox"/> clothes | <input type="checkbox"/> children's medicine |
| <input type="checkbox"/> toiletries | <input type="checkbox"/> Medicare/Medicaid coupons | <input type="checkbox"/> food stamps |
| <input type="checkbox"/> pet(s) named _____ | | |
| <input type="checkbox"/> birth certificates belonging to _____ | | |
| <input type="checkbox"/> passports belonging to _____ | | |
| <input type="checkbox"/> immigration documents belonging to _____ | | |
| <input type="checkbox"/> ANCSA Corp. ID | <input type="checkbox"/> Tribal enrollment card | <input type="checkbox"/> Certificate of Indian blood |
| <input type="checkbox"/> other _____ | | |

- h. Respondent to pay spousal support to petitioner _____
 How much monthly spousal support is requested and why is support necessary?

- i. Respondent not to sell or dispose of any personal property of the petitioners, any property jointly held, or any disputed property.

- j. Other requests for short-term protection:

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6. LONG-TERM PROTECTIONS REQUESTED. In addition to the protections listed above, petitioners request that the following be included in the long-term protective order. Note that these requirements cannot be included in the 20-day order. (Check all that apply.)

- a. Respondent not to use or possess a deadly weapon, including a firearm.
- b. Respondent to surrender any firearm owned or possessed by respondent.
- c. Respondent to pay to _____ the costs and fees petitioner(s) paid in bringing this action, in the amount of \$ _____
- d. Respondent to pay petitioners or the person(s) named below for expenses associated with the domestic violence (such as medical expenses, counseling, shelter, and repair or replacement of damaged property) described below:

<i>Pay to</i>	<i>Type of Expense</i>	<i>Amount</i>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

- e. Respondent to enroll in and complete, at respondent's expense (check all that apply):
 - Program for the rehabilitation of batterers
 - Treatment for substance abuse
- f. Other requests for long-term protection:

7. CHILDREN. (If child custody or child support does not apply, skip to question 8.)

a. Award _____ temporary custody of the minor child(ren) named below:

<i>(1) Child's Full Name</i>	<i>Child's Date of Birth</i>	<i>Petitioner's Relationship to Child</i>	<i>Respondent's Relationship to Child</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(2) Have the child(ren) lived in Alaska for the past six months? yes no

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8. OTHER CASES.

- a. List all open domestic violence criminal cases and open civil court cases (such as divorce and custody), in Alaska or elsewhere, that involve any petitioner or respondent:

<i>Type of Case</i>	<i>Court Location</i>	<i>Petitioner or Respondent</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

- b. List all other cases, open and closed, that involve respondent:

<i>Type of Case</i>	<i>Court Location</i>
_____	_____
_____	_____
_____	_____

9. ASSISTANCE FROM LAW ENFORCEMENT. In addition to the protections listed above, petitioners ask the court to issue an order requiring law enforcement to do the following (check all that apply):

- a. Accompany and assist petitioners to take possession of the residence identified in paragraph (5)(g)(1) above. Remove respondent from the residence if necessary.
- b. Accompany and assist petitioners to take possession of the personal items listed in paragraph (5)(g)(3) above.
- c. Accompany and assist petitioners to take possession of the vehicle identified in paragraph (5)(g)(2) above.
- d. Assist _____ to obtain custody of the minor child(ren) named in paragraph (7)(a)(1) above.
- e. Accompany respondent to the residence at (street address) _____ **once** to recover undisputed personal items, clothing, and _____

Law enforcement to notify the petitioner of the time and date they will accompany respondent to the residence. The petitioner may be present. Any item the petitioner objects to respondent removing, law enforcement shall restrain the respondent from removing from the residence.

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10. INFORMATION ABOUT RESPONDENT.

Respondent's full legal name: _____

Other information about respondent:

Any nicknames or other names used: _____

Respondent's mailing/physical address: _____

Respondent's Phone 1 _____

Respondent's Phone 2 _____

Respondent's Employer _____

Sex	Race	*Date of Birth*	HT	WT
Hair	Eyes	State ID /Driver's Lic. #	ST	
Other Identifiers				

11. INFORMATION ABOUT PETITIONERS. The court needs petitioners' mailing address in order to send court papers, including notices of hearing, to petitioners. If petitioners may be endangered by giving petitioners' mailing address, write a "message" address where petitioners can be sure to receive court papers. **If petitioners do not have any address and telephone number that can safely be revealed to respondent, ask the court clerk how petitioners can provide this information so that it will be kept confidential and not revealed to respondent.**

List the full legal name and any nicknames or other names used by each petitioner:

Petitioners' (safe) mailing address: _____

Petitioners' telephone numbers:

Home _____

Work _____

Cell _____

I swear or affirm under penalty of perjury that all the information I provided in this petition is true to the best of my knowledge and belief.

Date

Signature

Print Name

Subscribed and sworn to or affirmed before me at _____, Alaska
 on _____
 (date)

(SEAL)

 Clerk of Court, Notary Public or other person
 authorized to administer oaths
 My commission expires:

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CONFIDENTIAL LAW ENFORCEMENT INFORMATION SHEET

Notice to Petitioner: You must supply the respondent's name and birth date, if known. Give as much information as possible. This information will NOT be given to the respondent.

Notice to Law Enforcement: This information is confidential and supplied to assist you in serving the protective order. After serving (or failing to serve) the order, notify petitioner and complete the return of service section on the DV-125.

A. PETITIONER INFORMATION

Full name: _____ Date of birth: _____ Petitioner is a child.
 Petitioner's residence address: _____
 Is this the address respondent is to stay away from? Yes No
 Do you want to be notified when respondent is served? Yes No
 Contact phone(s): home _____ work _____ cell _____ msg _____

B. RESPONDENT INFORMATION

Full name: _____ Nicknames: _____ Respondent is a child.
 Residence Address: _____
 Is this the address respondent is to stay away from? Yes No Last four digits of SSN _____
 Other Addresses: _____
 Contact phone(s): home _____ work _____ cell _____ msg _____

Where is respondent now (what street address)?

Other information about respondent:

Friends / relatives / phone numbers / hangouts:

Sex	Race	*Date of Birth*	HT	WT
Hair	Eyes	State ID / Driver's Lic. #	ST	
Other Identifiers (facial hair, piercings, scars, tattoos, marks, etc.)				

Hazards at respondent's home (dogs, traps, guns):

Describe respondent's house: log frame apartment single family duplex
 1 story 2 story 3+ story main color _____ trim color _____
 Garage: separate attached none 4x4 needed to access address? Y N

Respondent's employer

Respondent's vehicle information

Employer address

Make _____ Model _____
 Plate No. _____ State _____
 Year _____

Work phone _____

van pickup canopy camper
 toolbox car 2 door 4 door
 SUV other _____

Work hours _____

Respondent's position _____

Supervisor _____

Other vehicles respondent is known to drive:

C. OFFICER SAFETY INFORMATION

Previous contact with police by respondent? No Yes Explain: _____

Any threats by respondent toward petitioner, family, police? Describe: _____

Weapons accessible to respondent (pistol, rifle, knife, other): _____

Expected mental state or history of respondent (include alcohol or drug use): _____

Is a divorce or other legal action pending that involves the respondent (child custody, eviction, bankruptcy, repossession of property)? _____

Draw a map on the back of this form if it will help law enforcement.