

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA  
AT \_\_\_\_\_

\_\_\_\_\_  
PETITIONER (protected person), Identifies as:  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), Identifies as:  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)  
(ONE PETITIONER)**

**1. TYPE OF ORDER.** Select the type of order being requested. *Select both the 20-day order and the long-term order if petitioner wants a protective order for more than 20 days.*

**20-day protective order**

A 20-day order can take effect immediately and without prior notice to the respondent.

Did you notify respondent before filing this petition?  yes  no

Describe your efforts, if any, to notify respondent before filing this petition:

\_\_\_\_\_  
\_\_\_\_\_

**Long-term protective order**

A long-term order may be issued after notice to respondent and a court hearing, and will usually last for one year. Long term orders may be extended. Each extension lasts for one additional year, and you may request an extension each year for as many years as needed.

**2. HOW ARE PETITIONER AND RESPONDENT RELATED?** (Check all that apply.)

- a. Married to each other now or in the past
- b. Child together
- c. Living together now or in the past (but not also dating or sexual relationship)
- d. Dating or sexual relationship now or in the past (but not also living together)
- e. Living together and dating or sexual relationship now or in the past
- f. Related by marriage now or in the past (such as in-laws)
- g. Other family relationship, respondent is petitioner's
  - child or step child     parent     step-parent
  - grandchild     grandparent     first cousin
  - uncle or aunt     niece or nephew     brother or sister
  - other relative (describe) \_\_\_\_\_
- h. Petitioner is a child of a person in a relationship described in (a) through (g) above

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3. Are there children in petitioner's household?  yes  no

**4. DESCRIBE THE DOMESTIC VIOLENCE.** Attach additional pages if necessary.

a. Describe what happened, when it happened, where it happened, and whether children were involved. Please be specific.

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

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

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

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**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 petitioner. Exceptions where it would be safe for the respondent to contact petitioner:
  - 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 petitioner's residence.
  - Petitioner doesn't want respondent to know the address of the petitioner's residence. Attach form DV-127 with Petitioner's address.
  - Petitioner's residence is at: \_\_\_\_\_
  - Does respondent live in this residence too?  yes  no
  - Does respondent know this address?  yes  no

- d. Respondent to stay away from and not telephone or contact the following locations:
 

<u>Place</u>	<u>Street Address</u>	<u>Distance to Stay Away</u>
<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"/> Petitioner's job	_____	_____ <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 petitioner or in petitioner's possession.
- f. Respondent not to possess or use controlled substances.

- g. Award petitioner 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):
  - house keys  garage door opener  children's belongings
  - mailbox keys  clothes  medicine  children's medicine
  - toiletries  Medicare/Medicaid coupons  food stamps
  - pet(s) named \_\_\_\_\_
  - birth certificates belonging to \_\_\_\_\_
  - passports belonging to \_\_\_\_\_
  - immigration documents belonging to \_\_\_\_\_
  - ANCSA Corp. ID  Tribal enrollment card  Certificate of Indian blood
  - other \_\_\_\_\_

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h. Respondent to pay spousal support to petitioner. How much monthly spousal support is petitioner requesting and why is support necessary?  
\_\_\_\_\_

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

**6. LONG-TERM PROTECTIONS REQUESTED.** In addition to the protections listed above, petitioner requests 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 paid in bringing this action, in the amount of \$\_\_\_\_\_.

d. Respondent to pay petitioner 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 petitioner is not requesting custody or child support, skip to question 8.)

a. Award petitioner *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>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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

(3) Who has the child(ren)?

Petitioner currently has the child(ren).

\_\_\_\_\_ currently has the child(ren).

(4) Is there already a custody order about one or more of the children?

yes  no  do not know. If yes, describe each order below:

<i>Child's Name</i>	<i>State that Issued Order</i>	<i>Case Number (if known)</i>	<i>Order Grants Custody to</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

b. *Visitation.* The court may only grant visitation to the respondent if the safety of the petitioner and children can be protected. Describe any safety concerns about visitation. What visitation schedule would work, if any, and where should exchanges take place?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c. *Child Support.* Petitioner requests that the court require the respondent to pay child support:  yes  no

(1) Financial information about respondent

Respondent's occupation \_\_\_\_\_

Name of respondent's employer \_\_\_\_\_

Respondent's *monthly* take-home pay is \$ \_\_\_\_\_

(2) Child support checks should be sent to \_\_\_\_\_  
(mailing address that can be revealed to respondent)

**Important Note:** To get a child support order, fill out a *Child Support Guidelines Affidavit* (court form DR-305, available from the court clerk or online at <https://public.courts.alaska.gov/web/forms/docs/dr-305.pdf>), and bring it to each court hearing, together with proof of petitioner's and respondent's income if available. If you cannot bring an affidavit, bring proof of income anyway. Proof of income includes documents such as paystubs, tax returns, W2 forms, and 1099 forms.

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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 either 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, petitioner asks the court to issue an order requiring law enforcement to do the following (check all that apply):

- a. Accompany and assist petitioner to take possession of the residence identified in paragraph (5)(g)(1) above. Remove respondent from the residence if necessary.
- b. Accompany and assist petitioner to take possession of the personal items listed in paragraph (5)(g)(3) above.
- c. Accompany and assist petitioner to take possession of the vehicle identified in paragraph (5)(g)(2) above.
- d. Assist (name) \_\_\_\_\_ 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 petitioner of the time and date they will accompany respondent to the residence. Petitioner may be present. Any item petitioner objects to respondent removing, law enforcement shall restrain respondent from removing from the residence.

**10. INFORMATION ABOUT RESPONDENT.**

Respondent's full legal name:

\_\_\_\_\_

Any nicknames or other names used:

\_\_\_\_\_

Respondent's mailing/physical address:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Respondent's Phone 1 \_\_\_\_\_

Respondent's Phone 2 \_\_\_\_\_

Respondent's Employer \_\_\_\_\_

Other information about respondent:

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

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

Petitioner's full legal name and any nicknames or other names used:

\_\_\_\_\_

Petitioner's (safe) mailing address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Petitioner's 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

\_\_\_\_\_

Petitioner's 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 \_\_\_\_\_

Other vehicles respondent is known to drive:  
 \_\_\_\_\_  
 \_\_\_\_\_

Supervisor \_\_\_\_\_

**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.**