

PROTECTION / DISORDERLY CONDUCT RESTRAINING ORDER COVER SHEET

THIS INFORMATION IS INTENDED FOR LAW ENFORCEMENT USE ONLY
To be delivered to the responsible Law Enforcement Agency along with the Order

ALL AREAS WITH * MUST BE COMPLETED.

PETITIONER

* Last Name _____ * First Name _____ * Middle Initial _____ * Date of Birth _____

Address (Street, City & State) _____ Phone Number () _____

Place of Employment / Education (Street, City & State) _____ Phone Number () _____

Does petitioner have children living with him / her?

_____ No _____ Yes Please list ages: _____

Is there to be notification of service?

_____ No _____ Yes Phone Numbers: _____

RESPONDENT

(This section must be completed by the Petitioner in order to enter the Restraining Order in the Statewide System.)

* Last Name _____ * First Name _____ * Middle Initial _____

Also Known As: _____
Last Name First Name Middle Initial

*Date of Birth _____ Social Security Number _____ * Sex _____ Race _____ * Height _____ Weight _____ Eyes _____ Hair _____

Other identifying characteristics: (glasses, long hair, beard, tattoos, etc.) _____

Last known address: (Street, City & State) _____ Phone Number () _____

Other address where respondent may be found: (Street, City & State) _____ Phone Number () _____

Place of employment: (Name of Business, Street, City & State) _____ Phone Number () _____

Description of respondent's vehicle: (Year, Make, Model, License #, Color) _____

Is respondent known to possess any firearms?

_____ No _____ Yes Indicate number of each: _____ Pistol _____ Rifle _____ Shotgun

Is respondent known to possess a N.D. concealed Weapon Permit?

_____ No _____ Yes _____ Unknown

Is respondent known to be violent towards persons other than the petitioner?

_____ No _____ Yes Explain _____

For Office Use Only:

Eviction: _____ No _____ Yes