

**STATE OF NORTH DAKOTA  
Petition for Protective Relief**

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF \_\_\_\_\_

\_\_\_\_\_ JUDICIAL DISTRICT

\_\_\_\_\_, )  
Petitioner )  
Vs )  
\_\_\_\_\_. )  
Respondent )  
)

Case No. \_\_\_\_\_  
PETITION FOR  
PROTECTIVE RELIEF

I, \_\_\_\_\_, apply for protective relief under the Domestic Violence Chapter of the North Dakota Century Code, Ch. 14-07.1.

1. I am a resident of \_\_\_\_\_ County and currently live at  
(optional): \_\_\_\_\_.

2.  I am requesting to be a protected party.  
 I have \_\_\_\_\_ child(ren) living with me, whose names and ages are:

Name	DOB	Respondent's child (Yes/No)	Requesting to be protected (Yes/No)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. I am asking the court for protective relief from (*please include full name*): \_\_\_\_\_  
\_\_\_\_\_.

Relationship to Respondent: \_\_\_\_\_.

4. Respondent's place of residence is: \_\_\_\_\_  
\_\_\_\_\_.

5. Respondent may also be found at: \_\_\_\_\_  
\_\_\_\_\_.

6. Respondent is employed at (*name, address, phone number of employer*): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

7. Description of Respondent: Height \_\_\_\_\_ Weight \_\_\_\_\_ Age \_\_\_\_\_  
DOB \_\_\_\_\_ Sex \_\_\_\_\_

Special Identifying Marks: \_\_\_\_\_

General Appearance: \_\_\_\_\_

8. I want the Respondent to be restrained from harassing, threatening, molesting, stalking, or injuring me/us.

9. I want the Respondent to be restrained from having contact with me/us in person, by phone, by mail, by any electronic means or through third parties.

10. I want the Respondent to be excluded from:  
a. Petitioner's/Protected Party's residence (*optional*): \_\_\_\_\_  
\_\_\_\_\_

b. Petitioner's/Protected Party's work (*optional*): \_\_\_\_\_  
\_\_\_\_\_

c. Petitioner's/Protected Party's day care (optional): \_\_\_\_\_  
\_\_\_\_\_

d. Other (optional): \_\_\_\_\_  
\_\_\_\_\_

11. I (choose one)  want /  do not want custody of my child(ren) at this time.

12. I (choose one)  am willing /  am not willing to grant Respondent visiting rights with regard to the child(ren).

Visitation Proposal: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

13. (Select all that apply)

I also ask that the Respondent surrender the following property: \_\_\_\_\_  
\_\_\_\_\_.

I will need further financial assistance from the Respondent at this time.

I request further relief as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

14. There (choose one)  is /  is not an outstanding court Order that addresses visitation, custody, or contact between the Respondent and me.

15. I believe there exists an immediate and present danger that the domestic violence described below will continue against me, if the Respondent has contact with me.



17. The following is a listing of any civil or criminal actions involving both me and the person from whom I am seeking relief, as required by Subsection 8 of Section 14-07.1-02 of the North Dakota Century Code: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

18. I declare, under penalty of perjury under the law of North Dakota, that I have read and understand the above statement, and to the best of my knowledge I believe that the facts stated above are true. I make this statement voluntarily.

Signed on \_\_\_\_\_, 20\_\_\_\_ in \_\_\_\_\_  
(City), \_\_\_\_\_ County, \_\_\_\_\_ (State),  
\_\_\_\_\_ (Country).

\_\_\_\_\_  
(Petitioner's Signature)

\_\_\_\_\_  
(Petitioner's Printed Name)

**If you left your address blank in Paragraph 1, leave the address and telephone number lines blank. Otherwise, complete the address and telephone number lines below.**

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Telephone Number)