

IN THE CIRCUIT COURT OF THE TWENTIETH JUDICIAL CIRCUIT,
IN AND FOR CHARLOTTE COUNTY, FLORIDA

Case No.: _____

Petitioner,

and

Respondent.

PETITION FOR INJUNCTION FOR PROTECTION AGAINST DOMESTIC VIOLENCE

I, *{full legal name}* _____, being sworn, certify that the following statements are true:

SECTION I. PETITIONER (This section is about you. It must be completed. However, **if you fear that disclosing your address to the respondent would put you in danger**, you should complete and file **Petitioner's Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(i), and write "confidential" in the space provided on this form for your address and telephone number.)

1. Petitioner currently lives at: *{street address}* _____
{city, state and zip code} _____
Telephone Number: *{area code and number}* _____
2. Petitioner's attorney's name, address, and telephone number is: _____

(If you do not have an attorney, write "none.")

SECTION II. RESPONDENT (This section is about the person you want to be protected from. It must be completed.)

1. Respondent currently lives at: *{street address, city, state, and zip code}* _____

Respondent's Driver's License number is: *{if known}* _____
2. Respondent is:
[all that apply]
____ a. the spouse of Petitioner. Date of Marriage: _____
____ b. the former spouse of Petitioner.
Date of Marriage: _____
Date of Divorce: _____
____ c. related by blood or marriage to Petitioner.
Specify relationship: _____
____ d. a person who is or was living in one home with Petitioner, as if a family.
____ e. a person with whom Petitioner has a child in common, even if Petitioner and Respondent never were married or living together.

3. Petitioner has known Respondent since *{date}* _____.
4. Respondent's last known place of employment: _____
Employment address: _____
Working hours: _____
5. Physical description of Respondent:
Race: ___ Sex: Male ___ Female ___ Date of Birth: _____
Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____
Distinguishing marks or scars: _____
Vehicle: (make/model) _____ Color: _____ Tag Number: _____
6. Other names Respondent goes by (aliases or nicknames): _____
7. Respondent's attorney's name, address, and telephone number is: _____

(If you do not know whether Respondent has an attorney, write "unknown." If Respondent does not have an attorney, write "none.")

SECTION III. CASE HISTORY AND REASON FOR SEEKING PETITION (This section must be completed.)

1. Has Petitioner ever received or tried to get an injunction for protection against domestic violence against Respondent in this or any other court?
____ Yes ____ No If yes, what happened in that case? (include case number, if known)

 2. Has Respondent ever received or tried to get an injunction for protection against domestic violence against Petitioner?
____ Yes ____ No If yes, what happened in that case? (include case number, if known)

 3. Describe **any other** court case that is either going on now or that happened in the past, including a dissolution of marriage, paternity action, or child support enforcement action, **between Petitioner and Respondent** *{include city, state, and case number, if known}*: _____

 4. Petitioner is the victim of an act of domestic violence **or** has reasonable cause to believe that he or she is in imminent danger of becoming the victim of an act of domestic violence. Below is a brief description of the latest act of violence or threat of violence that causes Petitioner to honestly fear imminent domestic violence by Respondent. (Use additional sheets if necessary.)

On *{date}* _____, at *{location}* _____,
the Respondent _____

- Check here if you are attaching additional pages to continue these facts.

5. **Additional Information**

[**all** that apply]

- a. Other acts or threats of domestic violence as described on attached sheet.
- b. This or other acts of domestic violence have been previously reported to *{person or agency}*: _____
- c. Respondent owns, has, and/or is known to have guns or other weapons.
Describe weapon(s): _____
- d. Respondent has a drug problem.
- e. Respondent has an alcohol problem.
- f. Respondent has a history of mental health problems. If checked, answer the following, if known.
Has Respondent ever been the subject of a Baker Act proceeding? () Yes () No
Is Respondent supposed to take medication for mental health problems? () Yes () No
If yes, is Respondent currently taking his/her medication? () Yes () No

SECTION IV. TEMPORARY EXCLUSIVE USE AND POSSESSION OF HOME (Complete this section **only** if you want the Court to grant you temporary exclusive use and possession of the home that you share with the Respondent.)

1. Petitioner claims the following about the home that Petitioner and Respondent share or that Petitioner left because of domestic violence:

[**all** that apply]

- a. Petitioner needs the exclusive use and possession of the home that the parties share at *{street address}* _____
{city, state, zip code} _____
- b. Petitioner cannot get another safe place to live because: _____

- c. If kept out of the home, Respondent has the money to get other housing or may live without money at *{street address}* _____
{city, state, zip code} _____

2. The home is:

[**one** only]

- a. owned or rented by Petitioner and Respondent jointly.
- b. solely owned or rented by Petitioner.
- c. solely owned or rented by Respondent.

SECTION V. TEMPORARY CUSTODY OF MINOR CHILD(REN) (Complete this section **only** if you are seeking temporary custody of any minor child. You must be the natural parent, adoptive parent, or guardian by court order of the minor child(ren). If you are asking the court to determine issues of temporary custody with regards to a minor child, you must also complete and file a **Uniform Child Custody Jurisdiction Act (UCCJA) Affidavit**, Florida Supreme Court Approved Family Law Form 12.902(d). **Note: If the paternity of the minor child(ren) listed below has not been established through either marriage or court order, the Court may deny temporary custody, visitation, and/or support.**

1. Petitioner is the natural parent, adoptive parent, or guardian by court order of the minor child(ren) whose name(s) and age(s) is (are) listed below.

Name	Place of Birth	Birth date	Sex
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. The minor child(ren) whom Petitioner is seeking temporary custody of:

[**one** only]

- a. saw the domestic violence described in this petition happen.
- b. were at the place where the domestic violence happened but did not see it.
- c. were not there when the domestic violence happened this time but have seen previous acts of domestic violence by Respondent.
- d. have not witnessed domestic violence by Respondent.

3. Name **any other** minor child(ren) who were there when the domestic violence happened. Include child(ren)'s name, age, sex, and parents' names. _____

4. **Visitation**

[**all** that apply]

a. Petitioner requests that the Court order reasonable visitation by Respondent with the minor child(ren), as follows: _____

b. Petitioner requests that the Court order supervised exchange of the minor child(ren) or exchange through a responsible person designated by the Court. The following person is suggested as a responsible person for purposes of such exchange. Explain: _____

c. Petitioner requests that the Court limit visitation by Respondent with the minor child(ren). Explain: _____

_____ d. Petitioner requests that the Court prohibit visitation by Respondent with the minor child(ren) because Petitioner genuinely fears that Respondent imminently will abuse, remove, or hide the minor child(ren) from Petitioner. Explain: _____

SECTION VI. TEMPORARY SUPPORT (Complete this section **only** if you are seeking financial support from the Respondent. You must also complete and file a **Family Law Financial Affidavit**, Florida Family Law Rules of Procedure Form 12.902(b) or (c), and **Notice of Social Security Number**, Florida Supreme Court Approved Family Law Form 12.902(j), if you are seeking child support. A **Child Support Guidelines Worksheet**, Florida Family Law Rules of Procedure Form 12.902(e), must be filed with the court at or prior to a hearing to establish or modify child support.)

[**all** that apply]

_____ 1. Petitioner claims a need for the money he or she is asking the Court to make Respondent pay, and that Respondent has the ability to pay that money.

_____ 2. Petitioner requests that the Court order Respondent to pay the following temporary alimony to Petitioner. (Petitioner must be married to Respondent to ask for temporary alimony.) Temporary Alimony Requested \$_____ every () week () other week () month.

_____ 3. Petitioner requests that the Court order Respondent to pay the following temporary child support to Petitioner. (The respondent must be the natural parent, adoptive parent, or guardian by court order of the minor child(ren) for the court to order the respondent to pay child support.) Temporary child support is requested in the amount of \$_____ every () week () other week () month.

SECTION VII. INJUNCTION (This section summarizes what you are asking the Court to include in the injunction. This section must be completed.)

1. Petitioner asks the Court to enter a TEMPORARY INJUNCTION for protection against domestic violence that will be in place from now until the scheduled hearing in this matter.

2. Petitioner asks the Court to enter, after a hearing has been held on this petition, a final judgment on injunction prohibiting Respondent from committing any acts of domestic violence against Petitioner **and:**

a. prohibiting Respondent from going to or within 500 feet of any place the Petitioner lives;
b. prohibiting Respondent from going to or within 500 feet of the Petitioner's place(s) of employment or school; the address of Petitioner's place(s) of employment or school is: _____

c. prohibiting Respondent from contacting Petitioner by mail, by telephone, through another person, or in any other manner;

[all that apply]

d. prohibiting Respondent from going to or within 500 feet of the following place(s) Petitioner or Petitioner's minor child(ren) must go often *{include address}*: _____

e. granting Petitioner temporary exclusive use and possession of the home Petitioner and Respondent share;

f. granting Petitioner temporary exclusive custody of the parties' minor child(ren);

g. establishing visitation rights with the parties' minor child(ren);

h. granting temporary alimony for Petitioner;

i. granting temporary child support for the minor child(ren);

j. ordering Respondent to participate in treatment, intervention, and/or counseling services;

k. referring Petitioner to a certified domestic violence center; and

any other terms the Court deems necessary for the protection of Petitioner and/or Petitioner's child(ren), including injunctions or directives to law enforcement agencies, as provided in section 741.30, Florida Statutes.

I UNDERSTAND THAT BY FILING THIS PETITION, I AM ASKING THE COURT TO HOLD A HEARING ON THIS PETITION, THAT BOTH RESPONDENT AND I WILL BE NOTIFIED OF THE HEARING, AND THAT I MUST APPEAR AT THE HEARING.

I HAVE READ EVERY STATEMENT MADE IN THIS PETITION, AND EACH STATEMENT IS TRUE AND CORRECT. I UNDERSTAND THAT THE STATEMENTS MADE IN THIS PETITION ARE BEING MADE UNDER PENALTY OF PERJURY, PUNISHABLE AS PROVIDED IN SECTION 837.02, FLORIDA STATUTES.

(initials)

Dated: _____

Signature of Petitioner

STATE OF FLORIDA
COUNTY OF CHARLOTTE

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

Personally known
 Produced identification
Type of identification produced

[Print, type, or stamp commissioned name of notary or clerk.]