

**ORDER OF PROTECTION**

**Case #** \_\_\_\_\_ **PR** \_\_\_\_\_

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**Notification of a Court Hearing**

I, \_\_\_\_\_, hereby acknowledge that I have been advised

of my hearing date, \_\_\_\_\_ at **10:00 a.m.**

=====OR=====

I, \_\_\_\_\_, hereby acknowledge that it is my **Responsibility** to call Clerk's office within **forty-eight(48) hours** to fine out the hearing date of my petition.

\_\_\_\_\_  
**Signature of Petitioner**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Clerk/ Deputy Clerk**

**Date:** \_\_\_\_\_

## NCIC / TCIC Protection Order Entry Form

### Agency/Case Data

**ORI:** \_\_\_\_\_ **Message Key:**  ETO (Temporary / Exparte)  ETOC (Temporary / Exparte with a Caution)  
**OCA:** \_\_\_\_\_  EPO (Protection Order)  EPOC (Protection Order with a Caution)  
**Notify Originating Agency:** \_\_\_\_\_ **Court ORI:** \_\_\_\_\_ **Protection Order Conditions:** \_\_\_\_\_  
**Protection Order Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_ **Date Protection Order Issued:** \_\_\_\_\_  
 Caution / Medical Conditions: \_\_\_\_\_  
 Brady Indicator: (check yes or no below) **Note:** Temporary / Ex Parte Orders must be **NO**.  
 Yes – Qualifies for Brady Indicator. Subject cannot receive / possess a firearm / ammunition.  No – Is not Brady Disqualified. Subject may receive or possess a firearm.

### Person (Respondent) Data

Name (Last, First Middle):						Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown		Race: <input type="checkbox"/> Black <input type="checkbox"/> Indian <input type="checkbox"/> White <input type="checkbox"/> Unknown <input type="checkbox"/> Asian	
Height: ft. in.	Weight: lbs.	Eyes:	Hair:	Skin Tone:	Date of Birth:	Place of Birth:	Scars, Marks and Tattoos:		
Social Security Number:		Miscellaneous Number:		FBI Number:		Fingerprint Classification:			
Operator License Number:				Operator License State:		Operator License Year of Expiration:			

Miscellaneous: (provide explanation of caution / medical conditions, explanation of order conditions, etc.)

### Vehicle Data

Vehicle Identification Number:			Vehicle Make:	Vehicle Model:	Vehicle Style:	Vehicle Color:
Vehicle Year:	License Plate Number:	License Plate State:	License Plate Year of Expiration:	License Plate Type:		

### Protected Person (Petitioner) Data

Name (Last, First Middle):		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown	Race: <input type="checkbox"/> Black <input type="checkbox"/> Indian <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Unknown	Date of Birth:	Social Security Number:
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# Confidential Intake Sheet Petition for An Order of Protection

(Clerk's Office only)

Case No. PR  
 Court General Sessions Court Div. II  
 County Anderson Tennessee

## PETITIONER / PLAINTIFF

First                      Middle                      Last

**Relationship to Respondent:** \_\_\_\_\_

Address & Phone No: \_\_\_\_\_  
 (      )

Petitioner's Employer: \_\_\_\_\_

Employer's Address & Phone No: \_\_\_\_\_  
 (      )

## PETITIONER / PLAINTIFF IDENTIFIERS

Sex	Race	DOB	Ht	Wt
Eyes	Hair	Social Security #		

***No one shall be denied an Order of Protection for failure to provide any or all of the Respondent's identifying information.***

### IMPORTANT:

If the abuser has threatened to or actually has used some type of weapon against you, or has some type of mental illness, you must show proof and/or state these facts in your affidavit.

**When filling out the petition**, you are the "*Petitioner*" and your abuser is the "*Respondent*". In the petition you must state what the Respondent has done (the specific actions of abuse or of a threat of abuse). After the petition is complete, the Judge will look at your petition and determine if there is probable cause that abuse or a threat of abuse has occurred. If it is determined that there is, a temporary order of protection will be signed and a hearing date will be set. The petition will be issued to the Sheriff's Department who will go out and attempt to serve the Respondent with a copy of your petition and a notice of the scheduled hearing date. At the hearing, if the Respondent has been served with the petition, you both will be given a chance to give your testimonies and put witnesses on the stand of whom you can question.

### TO THE PETITIONER:

There is no fee for the filing of an Order of Protection. However, there are certain court costs associated with the Court hearing and disposing of an Order of Protection. The usual cost of an Order of Protection is \$215.50, slightly more or less. You, the petitioner, are normally assessed these costs only in the following circumstances: You voluntarily dismiss the Petition, or you fail to appear before the court on the assigned place, date, and time to prosecute your petition.

It is necessary that a valid address is provided for the Respondent. If the home and/or work address of the Respondent are not known or is no longer valid, the probability of the Respondent being served is not good. Service of the complaint on the Respondent is necessary for the Court to proceed.

PETITIONER: I HAVE READ AND RECEIVED A COPY OF THE FOREGOING,

THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
 Petitioner

\_\_\_\_\_  
 Clerk

# Petition for Order of Protection and Order for Hearing

Case # (the clerk fills this in):

PR

In the General Session Div. II Court of Anderson County, TN

**Petitioner's name:** (person needing protection)

(List Child's name if filed on behalf of person under 18 years of age pursuant to TCA §36-3-602)

\_\_\_\_\_

firstmiddlelast

**Check if Applicable:**

Petitioner is under 18 and this Petition is being filed on behalf of an unemancipated person (someone under 18 years of age) pursuant to TCA §36-3-602. *This request is being made by \_\_\_\_\_ who is  child's parent or  legal guardian or  a caseworker.*

This request is being made by a law enforcement officer pursuant to TCA §36-3-619.  
Person on whose behalf this Petition is filed consents in writing to the filing and signs here

➡ \_\_\_\_\_

**\*\*PETITIONER'S CHILDREN UNDER 18 THAT PETITIONER BELIEVES ARE IN NEED OF PROTECTION:**

Name	Age	Relationship to Respondent	Name	Age	Relationship to Respondent
1. _____			3. _____		
2. _____			4. _____		

**Respondent's Information** (person you want to be protected from):

\_\_\_\_\_

firstmiddlelastdate of birth (MM/DD/YYYY)

\_\_\_\_\_

street addresscitystatezip

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

Employer's nameEmployer's phone #

**Describe Respondent:**

Sex	Race	Hair	Eyes	Height – Weight – SSN – Other	
<input type="checkbox"/> Male  <input type="checkbox"/> Female	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Brown	Height	
	<input type="checkbox"/> Asian	<input type="checkbox"/> Grey	<input type="checkbox"/> Hazel	Weight	
	<input type="checkbox"/> Black	<input type="checkbox"/> Blond	<input type="checkbox"/> Blue	Social Sec. #	(Provided to Clerk's office if known) <b>Do not list it here. XXXXXXXXXXXXXXXXXXXXXXXX</b>
	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Bald	<input type="checkbox"/> Green	Scars/Special Features	
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Brown	<input type="checkbox"/> Gray	Phone Number	
		<input type="checkbox"/> Other: _____			

① Check all of the following that apply to the Petitioner:

- a.  We are married or used to be married.
- b.  We live together or used to live together.
- c.  We have a child together.
- d.  We are dating, used to date, or have had sex.
- e.  We are relatives, related by adoption, or are/were in-laws. (Specify): \_\_\_\_\_
- f.  We are the children of a person whose relationship is described above (Specify): \_\_\_\_\_
- g.  The Respondent has stalked me.
- h.  The Respondent has sexually assaulted me.
- i.  Other: \_\_\_\_\_

**Warning!**

- Weapon involved
- Has or owns a weapon



② List all children under 18 that you have:

\*  Check here if listing addresses would put you or your child in danger. If so, leave any spaces for addresses blank.

Name of Child	Age	Is Respondent the parent of the child? (Write "yes" or "no")	Does the child need to be protected from the Respondent?	Child's address

③ Where else have the children (that you and Respondent have together) lived during the last 6 months?

Children's previous addresses

Who did they live with at this address?

_____	_____
_____	_____
_____	_____
_____	_____

④ **Other Court Cases** – Is there any court, other than this court, in which the respondent and petitioner are parties to an action? (including cases in which the parties have children in common)

Yes  No If "Yes," fill out below:

County and State  
of other case: \_\_\_\_\_

Case Number  
(if you know it): \_\_\_\_\_

Kind of case (check all that apply):  Divorce  Domestic Violence  Criminal  Juvenile  Child Support

Other (specify): \_\_\_\_\_

⑤ **Custody Rights** – Does anyone besides you or the Respondent claim to have custody or visitation rights to the children that you and Respondent have together?  Yes  No If “Yes,” who?

Name

Address

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⑥ **Describe Abuse – (use additional sheets of paper if necessary and attach to Petition)**

Describe abuse, stalking or assault (include, IF APPLICABLE, information about abuse or fear of abuse to your child(ren), personal property or animals)
Where and when did this happen?
Describe any weapons used.

**I ask the court to make the following Orders after the hearing: (check all that apply)**

⑦  **No Contact**  
Please order the Respondent to not contact:  me  our children under 18, either directly or indirectly, by phone, email, messages, text messages, mail or any other type of communication or contact.

⑧  **Stay Away**  
Please order the Respondent to stay away from  my home  my workplace or  from coming about me for any purpose.

⑨  **Personal Conduct**  
 Please order the Respondent not to:  
 Cause intentional damage to my property or interfere with the utilities at my home.  
 Hurt or threaten to hurt any animals that I/we own or keep.

⑩  **Temporary Custody**  
 Please give me temporary custody of our children.

⑪  **Child Support**  
 Please order the Respondent to pay reasonable child support.

⑫  **Petitioner Support (if married)**  
 Please order the Respondent to pay reasonable spousal support.

⑬  **Move-out / Provide other housing**  
 Please order the Respondent to (*check one*):  move out of our family home immediately  
 or  provide other suitable housing (if married)

Check here if your home or lease is in the Respondent's name **only**.

If the parties share a residence, please allow the Respondent to obtain his/her clothing and personal effects such as medicine and other things he/she may need.

⑭  **Counseling/Substance Abuse Programs**  
 Please order the Respondent to go to a certified batterers' intervention program if one available in the area or a counseling program.

⑮  **No Firearms**  
 Please order the Respondent not to have, possess, transport, buy, receive, use or in any other way get any firearm.

List all firearms that you believe the Respondent owns, controls, or has access to:

Type of Firearm (Pistol, Rifle, etc.)	Location

⑯  **Animals / Pets**  
 Please give me custody and control of any animal owned, possessed, leased, kept or held by me, the Respondent, or the children listed above.

⑰  **Costs, fees, and litigation taxes**  
 Please order the Respondent to pay all court costs, lawyer fees, and taxes for this case.

⑱  **Transfer the billing responsibility for and rights to wireless telephone number(s)**  
 Please issue an order directing \_\_\_\_\_, a wireless telephone service provider, to transfer the billing responsibility for and rights to the wireless telephone number or numbers of petitioner since petitioner is not the account holder.

Current account holder (name): \_\_\_\_\_

Billing telephone number: \_\_\_\_\_

New account holder (name): \_\_\_\_\_

All telephone numbers to transfer to new account holder:

Telephone number (include area code): \_\_\_\_\_

Check box to include attachment with additional telephone number(s).

*If the judge makes this order, you will be financially responsible for the transferred wireless telephone number or numbers, including the monthly service costs and costs of any mobile device associated with the wireless telephone number or numbers. You may be responsible for other fees. You must contact the wireless service provider to find out what fees you will be responsible for and whether you are eligible for an account.*

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**Other Orders:** (General Relief) \_\_\_\_\_

**I also ask the court to:**

1. Make an immediate Temporary Order of Protection. (*Ex-Parte Order of Protection*)
2. Notify law enforcement in this county of that Order.
3. Serve the Respondent a copy of that *Order* and Notice of Hearing to take place within 15 days of service.
4. Serve a copy of the Request, Notice of Hearing and Temporary Order on the parents of the Petitioner (if the Petitioner is under 18 years of age) unless the Court finds that this would create a serious threat of serious harm to the Petitioner. *T.C.A. §36-3-605 (c)*

**Petitioner (parent/legal guardian/caseworker/law enforcement personnel) signs below in front of a notary public and swears that he/she believes the above information is true:**

➡ \_\_\_\_\_ Date: \_\_\_\_\_

**Notary fills out below (TCA §36-3-602) –**

I declare that the Petitioner has read this Petition, and swears it be true to the best of her/his knowledge.

Sworn and subscribed before me, the undersigned authority,

By (Print name of notary): \_\_\_\_\_

On this date: \_\_\_\_\_



▶ \_\_\_\_\_

*Notary or Court Clerk or Judicial Officer signs here      Date notary's commission expires*

**The court finds good cause and will issue a Temporary Order of Protection.**

**The court does not find good cause and denies a Temporary Order of Protection** - The court finds there is no immediate and present danger of abuse to the petitioner and denies the Petitioner's request for a *Temporary Order of Protection*. The court will set the matter for hearing.

**ORDER FOR HEARING**

The Petitioner and Respondent must go to court and explain to the judge why the judge should or should not issue an Order of Protection against the Respondent.

This hearing will take place on *(date)*: \_\_\_\_\_ at *(time)*: \_\_\_\_\_  a.m.  p.m.  
 at *(location)*: ): **GENERAL SESSIONS 728 EMORY VALLEY ROAD, OAK RIDGE, TN 37830**

\_\_\_\_\_ Date \_\_\_\_\_  
*Judicial Officer's-signature*

<p><b>Proof of Service of Petition, Notice of Hearing and Temporary Order of Protection:</b>          Respondent was served on <i>(date)</i>: _____          at <i>(time)</i>: _____ by <i>(check one)</i>:  <input type="checkbox"/> Personal service  <input type="checkbox"/> U.S. Mail per TCA §§ 20-2-215 and 20-2-216          (The Respondent does not live in Tennessee.)</p> <p>_____          Server's signature</p> <p>_____          Print Name</p> <p>Petitioner was served on <i>(date)</i>: _____          at <i>(time)</i>: _____ by <i>(check one)</i>:  <input type="checkbox"/> Personal service</p> <p>_____          Server's signature</p> <p>_____          Print Name</p>	<p><b>If the Petitioner is under 18 (and Petitioner is a social worker filing on behalf of a minor)</b> and service of these documents would <i>not</i> put him/her at risk, the Clerk will serve and fill out below. (TCA § 36-3-605(c))</p> <p><i>I served the child's parents of copies of the Petition, Notice of Hearing, and Temporary Order of Protection by personal delivery or U.S. Mail on: (date): _____ at (address): _____</i></p> <p>_____          Clerk's signature: _____</p>
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**Notice to the Respondent about Firearms**

If the court grants the Petitioner's request for a Protective Order:

- You will not be able to have a firearm while this or any later protective order is in effect. You will have to transfer all firearms in your possession within 48 hours to any person who is legally allowed to have them. *18 U.S.C. §922(g)(8), TCA §36-3-606(f), TCA §36-3-625.*
- You will not be allowed to buy a firearm until the court says otherwise.

# Temporary Order of Protection (Ex Parte Order of Protection)

Case # (the clerk fills this in):  
**PR**

In the GENERAL SESSIONS DIV II Court of ANDERSON County, TN

**Petitioner** (person needing protection)

(List Child's name if filed on behalf of person under 18 years of age pursuant to TCA §36-3-602)

\_\_\_\_\_ first middle last

**Check if Applicable:**

Petitioner is under 18 and the Petition was filed on behalf of an unemancipated person (someone under 18 years of age) pursuant to TCA §36-3-602 by  child's parent or  legal guardian or  a caseworker.

The Petition was made by a law enforcement officer pursuant to TCA §36-3-619 and Petitioner consented to the filing of this Petition by the law enforcement officer.

**Petitioner's children under 18 protected by this Order:**

Name	Age	Relationship to Respondent	Name	Age	Relationship to Respondent
1. _____			3. _____		
2. _____			4. _____		

**Respondent's Information** (person you want to be protected from):

\_\_\_\_\_ first middle last date of birth  
(MM/DD/YYYY)

\_\_\_\_\_ street address city state zip

Respondent's Employer: \_\_\_\_\_  
Employer's name Employer's phone #

**Describe Respondent:**

Sex	Race	Hair	Eyes	Height - Weight - SSN - Other			
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Other: _____	<input type="checkbox"/> Black <input type="checkbox"/> Grey <input type="checkbox"/> Blond <input type="checkbox"/> Bald <input type="checkbox"/> Brown <input type="checkbox"/> _____ Other: _____	<input type="checkbox"/> Brown <input type="checkbox"/> Hazel <input type="checkbox"/> Blue <input type="checkbox"/> Green <input type="checkbox"/> Grey <input type="checkbox"/> Other: _____	Height		Weight	
				Social Sec. #	(Provided to Clerk's office if known) <b>Do not list it here. XXXXXXXXXXXXXXXXXXXXX</b>		
				Scars/Special Features			
				Phone Number			

**Petitioner's relationship to the Respondent** (Check all that apply):

- We are married or used to be married.
- We live together or used to live together.
- We have a child together.
- We are dating, used to date, or have had sex.
- We are relatives, related by adoption, or are/were in-laws. (Specify): \_\_\_\_\_
- We are the children of a person whose relationship is described above (Specify): \_\_\_\_\_
- The Respondent has stalked me.
- The Respondent has sexually assaulted me.
- Other: \_\_\_\_\_

The Court having reviewed the Petition for Temporary Order of Protection and finding, pursuant to TCA §36-3-605(a), that Petitioner is under an immediate and present danger of abuse from the Respondent and good cause appearing, the court issues the following:

**Warning!**

- Weapon involved
- Has or owns a weapon



**Orders to the Respondent:**

- Do not abuse, threaten to abuse, hurt or try to hurt, or frighten Petitioner and/or Petitioner's minor children under 18.
- Do not put Petitioner and/or Petitioner's minor children under 18 in fear of being hurt or in fear of not being able to leave or get away.
- Do not stalk or threaten to stalk Petitioner and/or Petitioner's minor children under 18.
- Do not come about the Petitioner and/or Petitioner's minor children protected by this order (including coming by or to a shared residence) for any purpose.
- Do not contact the Petitioner and/or Petitioner's minor children protected by this order either directly or indirectly, by phone, email, messages, mail or any other type of communication or contact.
- If the parties share(d) a residence, Respondent must immediately and temporarily vacate the residence shared with the Petitioner, pending a hearing on the matter.
- If the parties shared a residence, Respondent can obtain his/her clothing and personal effects such as medicine as follows: (List process as approved by local law enforcement personnel)

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- You must not hurt or threaten to hurt any animals owned or kept by the Petitioner/Petitioner's children.
- Other orders: \_\_\_\_\_

**Go to court** on (date): \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m.

at (location): **GENERAL SESSIONS DIV II 728 EMORY VALLEY ROAD, OAK RIDGE, TN 37830**

**You must obey these orders until the date of the hearing or until changes are made by the court.** If you do not agree with these orders, go to the court hearing and tell the court why. If you do not go, the court can make orders against you. You have the right to bring your own lawyer. If you do not obey all orders on this form, you may be fined and sent to jail.

**Only the court can change this Order.** Neither you nor the Petitioner can agree to change this Order. Even if the Petitioner tries to contact you or agrees to have contact with you, you must obey this Order. If you do not, you can be sent to jail for up to 10 days and fined up to \$50 for each violation

(TCA § 36-3-610)

Date: \_\_\_\_\_ Time: \_\_\_\_\_  a.m.  p.m.

▶ \_\_\_\_\_  
Judicial officer's signature

**Warnings to Respondent:**

A copy of this Order will be sent to all law enforcement agencies where Petitioner resides AND any court in which the respondent and petitioner are parties to an action. Any law enforcement officer who reasonably believes you have disobeyed this Order may arrest you.



If you hurt or try to hurt anyone while this Order, probation or diversion is in effect, you may face separate charges for aggravated assault, a Class C felony. (TCA § 39-13-102(c))

**Proof of Service**

The Respondent was served copies of the Petition, Notice of Hearing, and Temporary Order of Protection on:

(date): \_\_\_\_\_ at (time): \_\_\_\_\_  a.m.  p.m.

by (check one):

- Personal service
- U.S. Mail per TCA §§ 20-2-215 and 20-2-216 (The Respondent does not live in Tennessee.)

\_\_\_\_\_  
Server's signature

**If the Petitioner is under 18** and serving these documents would *not* put him/her at risk, the Clerk will serve and fill out below. (TCA § 36-3-605(c))

*I served the child's parents copies of the Petition, Notice of Hearing, and Temporary Order of Protection by personal delivery or U.S. Mail on: (date):* \_\_\_\_\_

at (address): \_\_\_\_\_

\_\_\_\_\_  
Clerk's signature: \_\_\_\_\_

Filed \_\_\_\_\_, 20\_\_\_\_ AT \_\_\_\_\_ AM/PM

REX A. LYNCH, CLERK

\_\_\_\_\_  
Clerk/Deputy Clerk