

PETITION FOR PROTECTION FROM ABUSE

IN THE COURT OF COMMON PLEAS OF
LEHIGH COUNTY, PENNSYLVANIA
CIVIL COURT DIVISION

1. PLAINTIFF

(Name)

(address)

(City, State, Zip Code)

File No: _____

Plaintiff's DOB: _____

VS

2. DEFENDANT

(Name (if a minor, please use initials))

(address)

(City, State, Zip Code)

CAUTION

DEFENDANT IDENTIFIERS

Weapon Involved DOB _____ HEIGHT: _____ Ft. _____ In.
 Weapon Present on the SEX: _____ WEIGHT: _____
Property RACE: _____ EYES: _____
 Requested Weapon HAIR: _____
Relinquishment SSN: _____
DRIVER'S LICENSE#: _____
EXP DATE: _____ STATE: _____

Defendant's place of employment is: _____

Check here if you have reason to believe that Defendant is a licensed firearms dealer, is employed by a licensed firearms dealer or manufacturer, is employed as a writer, researcher or technician in the firearms or hunting industry, or is required to carry a firearm as a condition of employment

3. I am filing this petition on behalf of Myself or Another Person.

If you checked "myself," please answer all questions referring to yourself as "Plaintiff." If you only checked "another person," please answer all questions referring to that person as the "Plaintiff," and provide your address here, as filer, unless confidential:

If you checked "Another Person," also indicate your relationship with Plaintiff (s)

- parent of minor Plaintiff(s)
- adult household member with minor Plaintiff(s)
- court appointed guardian of incompetent Plaintiff(s)
- applicant for appointment as guardian ad litem of minor Plaintiff(s)

4. Name(s) of all person(s), include minor child(ren) initials only, who seek protection from abuse:

5. Indicate the relationship between Plaintiff and Defendant:

- spouse or former spouse of Defendant
- parent of a child with Defendant
- current or former sexual or intimate partner with Defendant
- child of parties
- child of Plaintiff
- child of Defendant
- family member related by blood (consanguinity) to Defendant
- family member related by marriage or affinity to Defendant
- sibling (person who shares parenthood) of Defendant

Check here if Defendant is 17 years old or younger.

6. Have Plaintiff and Defendant been involved in any of the following court actions?

- Divorce; Custody; Support; Protection from Abuse

If you indicated any of the above, briefly indicate when and where the case was filed and the court number if known:

7. Has Defendant been involved in any criminal court action? Yes No
 If you answered yes, is Defendant currently on probation/parole? Yes No
 Has Defendant been determined to be a perpetrator in a founded or indicated report Under the Child Protective Services Law, 23 Pa. C.S. §§6301-6386? Yes No
 If you answered Yes, what county's court or child protective services agency issued the founded or indicated report? _____

8. Plaintiff and Defendant are the parents of the following minor child/ren: [initial(s) and year of birth of minor child(ren)]:

<u>Initials</u>	<u>Year of Birth</u>
_____	_____
_____	_____
_____	_____
_____	_____

9. If Plaintiff and Defendant are the parents of any minor child/ren together, is there an existing court order regarding their custody? Yes No

(a) Where has each child resided during the past five years?

Child's initials	Person(s) child lived with:	Address, unless confidential:	When:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(b) List any other persons who are known to have or claim a right to custody of each child listed above.

Name:	Address:	Basis of Claim:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

10 The following other minor child/ren presently live with Plaintiff: [please use initials and year of birth for minor child(ren)]

<u>Initials</u>	<u>Year of Birth</u>
_____	_____
_____	_____
_____	_____
_____	_____

11. The facts of the most recent incident of abuse are as follows:

Date: _____ Time: _____

Location: _____

Describe in detail what happened, including any physical or sexual abuse, threats, injury, incidents of stalking, medical treatment sought, and/or calls to law enforcement:

Medical treatment was was not sought for current allegations

Law Enforcement was was not contacted for current allegations

12. If Defendant has committed prior acts of abuse against Plaintiff or the minor child/ren, describe these prior incidents, including any threats, injuries, or incidents of stalking, and indicate approximately when such acts of abuse occurred:

Medical treatment was was not sought for prior allegations

Law Enforcement was was not contacted for prior allegations

13. (a) Has Defendant used or threatened to use any firearms or other weapons against Plaintiff or the minor child/ren? If so, please describe the use or threatened use below and list on "Attachment A" to Petition, which is incorporated by reference into this petition, any firearms, other weapons, or ammunition Defendant used or threatened to use against Plaintiff or the minor child/ren: Yes No
- (b) Other than the firearms, other weapons, or ammunition Defendant used or threatened to use against Plaintiff or the minor child/ren, does Defendant, to the best of your knowledge or belief, own or possess any additional firearm, other weapon, ammunition, or any firearm license? Yes No
- (c) If the answer to (b) is "yes," list any additional firearm, other weapon, or ammunition owned by or in the possession of Defendant on Attachment "A" to Petition; which is incorporated into this Petition.
- (d) Plaintiff DOES DOES NOT request that the court order Defendant to relinquish firearms, other weapons, or ammunition listed on Attachment A to Petition. If Plaintiff does seek relinquishment, identify on Attachment A to Petition the firearms, other weapons, or ammunition Plaintiff requests the court to order Defendant to relinquish.

14. Identify the sheriff, police department, or law enforcement agency in the area in which Plaintiff lives that should be provided with a copy of the protection order:

PSP - Fogelsville

15. There is an immediate and present danger of further abuse from Defendant

Evict/Exclude Plaintiff is asking the court to evict and exclude Defendant from the following residence:

Rented Owned by _____

Defendant owes a duty of support to Plaintiff or the minor child/ren.

Plaintiff has suffered out-of-pocket financial losses as a result of the abuse described above. These losses are:

FOR THE REASONS SET FORTH ABOVE, I REQUEST THAT THE COURT ENTER A TEMPORARY ORDER, and AFTER HEARING, A FINAL ORDER THAT WOULD DO THE FOLLOWING (CHECK ALL FORMS OF RELIEF REQUESTED):

- A. Restrain Defendant from abusing, harassing, stalking, threatening, or attempting or threatening to use physical force against Plaintiff or the minor child/ren in any place where Plaintiff or the child/ren may be found.
- B. Evict/Exclude Defendant from Plaintiff's residence and prohibit Defendant from attempting to enter any temporary or permanent residence of Plaintiff.
- C. Require Defendant to provide Plaintiff or the minor child/ren with other suitable housing.
- D. Award Plaintiff temporary custody of the minor child/ren and place the following restrictions on contact between Defendant and the child/ren:
- E. Prohibit Defendant from having any contact with Plaintiff or the minor child/ren, in person, by telephone, or in writing, personally or through third persons, including but not limited to any contact at Plaintiff's school, business, or place of employment, except as the court may find necessary with respect to partial custody with the minor child/ren.
- F. Prohibit Defendant from having any contact with Plaintiff's relatives and Plaintiff's children listed in this petition, except as the court may find necessary with respect to partial custody with the minor child/ren. The following persons are Plaintiff's relatives or family and household members that Plaintiff believes require protection from stalking and harassment by Defendant.
- G. Order Defendant to temporarily relinquish the firearms, other weapons, or ammunition listed on "Attachment A" to Petition, under Defendant's control, or in Defendant's possession, or any firearm license to the sheriff or the appropriate law enforcement agency.
- H. Prohibit Defendant from acquiring or possessing firearms for the duration of the order.
- I. Order Defendant to pay temporary support for Plaintiff or the minor child/ren, including medical support and
 - payment of the rent or mortgage on plaintiff's residence.
- J. Direct Defendant to pay Plaintiff for the reasonable financial losses suffered as a result of the abuse, to be determined at the hearing.
- K. Order Defendant to pay costs of this action, including filing and service fees.
- L. Order Defendant to pay Plaintiff's reasonable attorney's fees

- M. Order the following additional relief, not listed above:
- N Grant such other relief as Plaintiff requests or the court deems appropriate
- O Order the police, sheriff or other law enforcement agency to serve Defendant with a copy of this petition, any order issued, and the order for hearing. Plaintiff will inform the designated authority of any addresses, other than Defendant's residence, where Defendant can be served
- P Direct the Pennsylvania State Police, the municipal police, or the sheriff to accompany Plaintiff to his or her residence to retrieve personal belongings or accompany Plaintiff while the petition or order is served on Defendant, if Plaintiff has reason to believe his or her safety is at risk.

VERIFICATION

I verify that I am the petitioner as designated in the present action and that the facts and statements contained in the above petition are true and correct to the best of my knowledge. I understand that any false statements are made subject to the penalties of 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.

Signature

Date

Additional Information

Plaintiff:

Name: _____

Phone Number(s): _____

Email Address: _____

Do you need an Interpreter? YES NO

If Yes, What Language: _____

List any additional address(es) you are requesting to be protected, such as your place of employment or school. List full address including: Business or School Name (if applicable), Street Address with apartment, floor, suite #, etc., City, State, and Zip Code.

Do you have access to a smart phone or computer with a camera and or microphone and internet access?

YES NO

Do you have the ability to print an email attachment prior to the scheduled remote interview?

YES NO

Are you available for video interview or telephone interview during the hours of 8:00 a.m. and 2:00 p.m.?

YES NO

Defendant:

Name: _____

Phone Number(s): _____

Email Address: _____

Does the Defendant need an Interpreter? YES NO

If Yes, What Language: _____

Is the Defendant incarcerated? YES NO

If Yes, list the Facility name and defendant's inmate number, if known:

Does the Defendant have access to a smart phone or computer with a camera and or microphone and internet access?

YES NO

Does the Defendant have the ability to print an email attachment prior to the scheduled remote interview?

YES NO

IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA
CIVIL COURT DIVISION

PLAINTIFF

(Name)

(address)

(City, State, Zip Code)

File No:

Plaintiff's DOB: _____

VS

DEFENDANT

(Name)

(address)

(City, State, Zip Code)

"ATTACHMENT A" TO PETITION
FIREARMS, OTHER WEAPONS OR AMMUNITION INVENTORY

I, _____, Plaintiff in this Protection from Abuse action hereby:

(a) State that Defendant has has not used or threatened to use the following firearms, other weapons or ammunition against Plaintiff or the minor child/ren (include addresses or locations, if known, such as "front seat of blue truck," "gun cabinet," "bedroom closet," etc.):

(b) State that Defendant, to the best of my knowledge or belief, owns or possesses the following firearms, other weapons or ammunition not set forth in (a) above (include addresses or locations, if known):

(c) Request that the Court order Defendant to relinquish the following firearms, other weapons or ammunition (include addresses or locations, if known):

All firearms, other weapons or ammunition owned or possessed by Defendant.

Notice: *If you fail to appear for the final hearing or if the Court dismisses or denies the Protection from Abuse Order, the Defendant is eligible to have the guns/weapons, ammunition and all licenses and/or permits that were confiscated returned upon clearance from the Pennsylvania Instant Check (PIC) system.*

This attachment will be withheld from public inspection in accordance with 23 Pa.C.S. §6108(a)(7)(v).

Signature: _____

Name: _____

Date: _____

IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA
FAMILY DIVISION

vs
Plaintiff)
) File No.
)
Defendant)

TO: THE CLERK OF JUDICIAL RECORDS --- CIVIL DIVISION

Praecipe for Self-Representation:

I, _____, Plaintiff Defendant,
represent myself in the within action.

Remove _____, Esq., as my attorney of record.

Address change request:

Please update the following address for:

Plaintiff Defendant Other _____

All pleadings and legal papers can be served on me at the address listed below:

Print Name

Date

Signature

Telephone number

Address

City, State, Zip Code

EMAIL: _____

I understand that I am under a continuing obligation to provide current contact information to the court, to other self-represented parties, and to attorneys of record.

THE PARTY FILING THIS PRAECIPE MUST PROVIDE NOTICE BY SENDING A COPY TO ALL PARTIES AND ATTORNEYS.