|  |  |  |
| --- | --- | --- |
| **IN THE** |       | **COURT** |
|  |       | **COUNTY, OHIO** |
|  |
|       |  |  |
| **Petitioner** | : | **Case No.** |       |
|       |  |  |
| Address | : | **Judge/Magistrate** |       |
|       |  |  |
| City, State, Zip Code | : |  |
|  |  |  |
| Date of Birth |       | / |       | / |       | : | **PETITION FOR DOMESTIC VIOLENCE CIVIL** |
|  |  | **PROTECTION ORDER (R.C. 3113.31)** |
| **v.** | : |  |
|  |  |  |
|       | : |  |
| **Respondent** |  |  |
|       | : |  |
| Address |  |  |
|       | : |  |
| City, State, Zip Code |  |  |
|  | : |  |
| Date of Birth |       | / |       | / |       |  |  |
|  |
| **check every** **[ ]  that applies. IF YOU ARE REQUESTING YOUR ADDRESS REMAIN CONFIDENTIAL,****DO NOT WRITE YOUR ADDRESS ON THIS FORM. PLEASE PROVIDE ANOTHER MAILING ADDRESS** **WHERE YOU CAN SAFELY RECEIVE NOTICES FROM THE COURT. THIS FORM IS A PUBLIC RECORD.** |
|  |
| [ ]  1.  | Petitioner is a family or household member of Respondent and a victim of domestic violence and seeks relief on Petitioner’s own behalf. The relationship of Petitioner to Respondent is that of: |
| [ ]  | Spouse of Respondent | [ ]  | Child of Respondent |
| [ ]  | Former spouse of Respondent | [ ]  | Parent of Respondent |
| [ ]  | Natural parent of Respondent’s child | [ ]  | Foster Parent |
| [ ]  | Other relative (by blood or marriage) of Respondent/ Petitioner who has lived with Respondent at any time | [ ]  | Person “living as a spouse of Respondent” is defined as: * now cohabiting;
* or cohabited within five years before the alleged act of domestic violence
 |
|  |
| [ ]  2. | Petitioner seeks relief on behalf of the following family or household members: |
|  |  | **HOW RELATED TO** |  |
| **NAME** | **DATE OF BIRTH** | **PETITIONER** | **RESPONDENT** | **RESIDES WITH** |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|  |
|  |
|  |  |
| 3. | Respondent has engaged in the following act(s) of domestic violence: (Describe the acts as fully as possible. **Attach additional pages if necessary.**) |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |  |
| 4. | Petitioner requests that the Court grant relief under R.C. 3113.31 to protect the Petitioner and/or the family or household members named in this Petition from domestic violence by granting a civil protection order that: |
| [ ]  (a) | Directs Respondent to not abuse Petitioner and the family or household members named in this Petition by harming, attempting to harm, threatening, following, stalking, harassing, forcing sexual relations upon them, or by committing sexually oriented offenses against them. |
|  |  |
| [ ]  (b) | Requires Respondent to leave and not return to or interfere with the following residence and grants Petitioner exclusive possession of the residence: |
|  |       |
|  |       |
|  |  |
| [ ]  (c) | Divides household and family personal property and directs Respondent to not remove, damage, hide, or dispose of any property or funds that Petitioner owns or possesses. |
|  |  |
| [ ]  (d) | Temporarily allocates parental rights and responsibilities for the care of the following minor children and suspends Respondent’s visitation rights until a full hearing is held (include names and birth dates of the minor children): |
|  |       |
|  |       |
|  |  |
| [ ]  (e) | Establishes temporary visitation rights with the following minor children and requires visitation to be supervised or occur under such conditions that the Court determines will ensure the safety of Petitioner and the minor children (include names and birth dates of the minor children): |
|  |       |
|  |       |
|  |  |
| [ ]  (f) | Requires Respondent to provide financial support for Petitioner and the other family or household members named in this Petition. |
|  |  |
| [ ]  (g) | Requires Respondent to complete batterer counseling, substance abuse counseling, or other counseling as determined necessary by the Court. |
|  |  |
| [ ]  (h) | Requires Respondent to refrain from entering, approaching, or contacting (by any means) the residence, school, business, and place of employment of or approaching or contacting (by any means) Petitioner and the family or household members named in this Petition. |
|  |  |
| [ ]  (i) | Requires Respondent to permit Petitioner or other family or household member to have exclusive  |
|  | use of the following motor vehicle: |       |
|  |  |
| [ ]  (j) | Includes the following additional provisions: |        |
|  |       |
|  |  |
| [ ]  5. | Petitioner further requests that the Court issue an *ex parte* (emergency) protection order under R.C. 3113.31(D) and (E) and this Petition. |
|  |  |
| 6. | Petitioner further requests that the Court issue no mutual protection orders or other orders against Petitioner unless all of the conditions of R.C. 3113.31(E)(4) are met. |
|  |
| 7. | Petitioner further requests that if Petitioner has a victim advocate, the Court permit the victim advocate to accompany Petitioner at all stages of these proceedings as required by R.C. 3113.31(M). |
|  |
| 8. | Petitioner further requests that the Court grant such other relief as the Court considers equitable and fair. |
|  |
| 9. | Petitioner lists here all present court cases and pertinent past court cases (including civil, criminal, divorce, juvenile, custody, visitation, and bankruptcy cases) that relate to the Respondent, you, your children, your family, or your household members: |
| **CASE NAME** | **CASE NUMBER** | **COURT/COUNTY** | **TYPE OF CASE** | **RESULT OF CASE** |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|  |
| **I hereby swear or affirm that the answers above are true, complete, and accurate to the best of my knowledge. I understand that falsification of this document may result in a contempt of court finding against me which could result in a jail sentence and fine, and that falsification of this document may also subject me to criminal penalties for perjury under R.C.** **2921.11.** |
|  |
| **DO NOT SIGN THIS FORM UNLESS YOU ARE IN FRONT OF THE PERSON WHO WILL NOTARIZE THE PETITON FOR YOU.** |
|  |
|  |  |
| **SIGNATURE OF PETITIONER** |  |
|  |
| Sworn to and subscribed before me on this |       | day of |       | , |       |
|  |
|  |  |
| **NOTARY PUBLIC** |  |
|  |
|  |
| **IF YOU ARE REQUESTING YOUR ADDRESS REMAIN CONFIDENTIAL, DO NOT WRITE YOUR ADDRESS** **ON THIS FORM. PLEASE PROVIDE ANOTHER MAILING ADDRESS WHERE YOU CAN SAFELY RECEIVE****NOTICES FROM THE COURT. THIS FORM IS A PUBLIC RECORD.** |
|  |  |
| Petitioner’s Safe Address: |  |
|       |  |
|       |  |
|       |  |
|  |  |
|  |  |
| Signature of Attorney for Petitioner (if applicable) |  |
|  |  |
|       |  |
| Name of Attorney (if applicable) |  |
|       |  |
| Attorney’s Address |  |
|       |  |
|  |  |
|       |  |
| City, State, Zip Code |  |
|  |  |
|       |  |
| Attorney’s Registration Number |  |
|  |  |
|       |  |
| Attorney’s Telephone |  |
|  |  |
|       |  |
| Attorney’s Fax |  |
|  |  |
|       |  |
| Attorney’s Email |  |