

1 **WASHOE TRIBE OF NEVADA AND CALIFORNIA**

2 **WASHOE TRIBAL COURT – CIVIL DIVISION**

3

4 \_\_\_\_\_

5 Applicant,

6 vs.

7 \_\_\_\_\_

8 Adverse Party/Parties.

9

10

11

Case No. C-WT-\_\_\_\_\_

**APPLICATION FOR TEMPORARY**  
**PROTECTION ORDER AGAINST**  
**DOMESTIC VIOLENCE**

12 **Applicant states the following facts under penalty of perjury:**

13 **1.** The following relationship exists between the Applicant (me) and the  
14 Adverse Party:

15 We are related by:

16 \_\_\_\_\_ Blood (father, mother, sister, brother, etc.) \_\_\_\_\_

17 \_\_\_\_\_ Marriage (husband, wife, ex-husband, ex-wife), \_\_\_\_\_

18 \_\_\_\_\_ We are living together at this time \_\_\_\_\_ Yes \_\_\_\_\_ No.

19 \_\_\_\_\_ We lived together in the past \_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, tell when and  
20 where you lived together (beginning and ending dates, who moved out)  
21 \_\_\_\_\_

22 \_\_\_\_\_

23 We are in a dating relationship \_\_\_\_\_ Yes \_\_\_\_\_ No.

24 We dated in the past \_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, When?

25 Beginning and ending dates, and who ended the relationship:  
26 \_\_\_\_\_

27 \_\_\_\_\_

28 We have child(ren) **TOGETHER**: \_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, where and with

1 whom are these child(ren) living? \_\_\_\_\_

2 2. My address is \_\_\_\_\_ CONFIDENTIAL or, \_\_\_\_\_ Other: \_\_\_\_\_

3 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

4 \_\_\_\_\_ My mailing address is: \_\_\_\_\_

5 My Date of Birth is: \_\_\_\_\_

6 I am \_\_\_\_\_ buying , renting this residence. Lease/Title is held in the following  
7 name(s): \_\_\_\_\_

8 I have been living in this Residence for \_\_\_\_\_ (state length of time)

9 3. My employment is: \_\_\_\_\_ CONFIDENTIAL or \_\_\_\_\_ is: \_\_\_\_\_

10 Address: \_\_\_\_\_

11 4. Adverse Party's residence is: \_\_\_\_\_

12 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

13 Adverse Party's mailing address is: \_\_\_\_\_

14 Adverse Party's has been living in this residence for \_\_\_\_\_ (state length of time)

15 5. Adverse party's employment is: \_\_\_\_\_

16 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

17 6. The name(s) and age(s) of minor child(ren) who live in my home, are as follows:

18 I have placed a YES or NO to tell whether I have physical custody of the minor  
19 child(ren).

20 1 \_\_\_\_\_

21 NAME (FIRST AND LAST) DOB ADVERSE PARTY'S CUSTODY (YES/NO)

22 2 \_\_\_\_\_

23 3 \_\_\_\_\_

24 7. Check if YOU or the ADVERSE PARTY have ever filed a case in any Court for

25 \_\_\_\_\_ Divorce, \_\_\_\_\_ Custody, \_\_\_\_\_ Paternity, \_\_\_\_\_ Child Support, \_\_\_\_\_

1 Guardianship, \_\_\_\_\_ Protection Order \_\_\_ Stalking/Harassment Order.

2 Please indicate where the case was filed, and list any case numbers. \_\_\_\_\_

3 \_\_\_\_\_  
4 8. \_\_\_ I have been or reasonably believe I will become a victim of domestic violence  
5 committed by the Adverse Party.

6 \_\_\_ My child(ren) have been or are in danger of being a victim of domestic  
7 violence committed by the Adverse Party.  
8

9 **STATEMENT OF FACTS:**

10 State the facts which support your belief. Be as specific as you can. Include the  
11 approximate dates of domestic violence, how long it has gone on, and whether law  
12 enforcement or medical personnel have been involved.

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9. Has CHILD PROTECTIVE SERVICES (CPS) or WASHOE TRIBAL SOCIAL SERVICES ever been contacted regarding any member of the household in the past year?

\_\_\_\_\_ YES \_\_\_\_\_ NO. Is CPS or Washoe Tribal Services involved with this family?

\_\_\_\_\_ YES \_\_\_\_\_ NO. If yes to the question, give details, including caseworker's name: \_\_\_\_\_

10. Have YOU ever been arrested for domestic battery, or any other crime committed against your spouse, partner, or child(ren)? \_\_\_\_\_ YES \_\_\_\_\_ NO. If yes, WHEN and where? \_\_\_\_\_

11. To your knowledge, has the ADVERSE PARTY ever been arrested for domestic battery, or any other crime committed against his/her spouse, partner, or child(ren) \_\_ Yes \_\_ No. If yes, WHEN and where? \_\_\_\_\_

12. \_\_\_ An emergency exists, and I need an Order for Protection from Domestic Violence issued immediately without notice to the Adverse Party to avoid irreparable injury or harm.

1 13. \_\_\_ I request an immediate Temporary Order for Protection Against Domestic  
2 Violence (which could be in effect for up to 30 days, and ask that it include  
3 the following relief (Check applicable sections):

4 \_\_\_ (a) Prohibit the Adverse Party, either directly or through an agent,  
5 from threatening, physically injuring or harassing me and/or my  
6 minor child(ren).

7 \_\_\_ (b) Prohibit the Adverse Party from any contact with me whatsoever.

8 \_\_\_ (c) Exclude the Adverse Party from my residence and order the  
9 Adverse Party to stay at least 100 yards away from my residence.  
10

11 \_\_\_ (d) Obtain law enforcement assistance to either: \_\_\_ accompany me to  
12 the following residence \_\_\_\_\_, or: \_\_\_ to accompany the  
13 Adverse Party, to the following residence, \_\_\_\_\_  
14 \_\_\_\_\_, to obtain personal property described as follows:  
15 \_\_\_\_\_.

16 \_\_\_ (e) Grant temporary custody of the minor child(ren) to me, until a  
17 hearing may be held with the appropriate parties.

18 \_\_\_ (f) Order that custody, visitation, and support of the minor child(ren)  
19 remain as ordered in a Decree of Divorce/Order entered in Case  
20 Number \_\_\_\_\_, in the \_\_\_\_\_ Court  
21 of the State of \_\_\_\_\_.

22 \_\_\_ (g) Order the Adverse Party to stay at least 100 yards away from the  
23 minor child(ren)'s school, or day care, located at \_\_\_ CONFIDENTIAL, or .  
24 \_\_\_\_\_

25 \_\_\_ (h) Order Adverse Party to stay at least 100 yards away from my place  
26 of employment.  
27  
28

1 \_\_\_\_\_ (i) Order the Adverse Party to stay at least 100 yard away from places  
2 which I or my minor child(ren) frequent regularly:

3 \_\_\_\_\_ CONFIDENTIAL, or \_\_\_\_\_

4 \_\_\_\_\_ (j) Additionally, I request the following other conditions:  
5 \_\_\_\_\_

6 **You may attach additional sheets to this Application.**

7 **DECLARATION:** I declare under penalty of perjury under the laws of the Washoe  
8 Tribe of Nevada and California that I am the Applicant herein and that I have read  
9 the statements contained herein or have had them read to me and I believe these  
10 statements to be true and the requested Order is needed.

11 **NOTE:** If granted and served, a Temporary Order of Protection may be enforced for  
12 up to 30 days, except that if an Extended Order remains in effect until the hearing  
13 on the Extended Order is held by the Court. If granted and served, an Extended  
14 Order may be enforced for up to One Year.

15 I acknowledge that an Extended Order may only be granted after notice of the  
16 Application for the Order and of the Hearing thereon is served upon the Adverse  
17 Party pursuant to the Washoe Tribe Law and Order Code.

18 DATED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

19  
20 \_\_\_\_\_  
Signature of Applicant

21 RECEIVED BY:

22 Date: \_\_\_\_\_

23 \_\_\_\_\_  
24 Court Coordinator or other Court Officer  
25  
26  
27  
28

1 **Instructions to the Applicant: You must provide as much information known to**  
2 **you about the Adverse Party below:**

3 **TEMPORARY PROTECTION ORDER INFORMATION SHEET (confidential)**

4 List additional persons to be protected:

5 Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SEX \_\_\_\_\_

6 (First, Middle Initial, Last)

7 \_\_\_\_\_ DOB: \_\_\_\_\_ SEX \_\_\_\_\_

8 (First, Middle Initial, Last)

9 \_\_\_\_\_ DOB: \_\_\_\_\_ SEX \_\_\_\_\_

10 (First, Middle Initial, Last)

11 **ADVERSE PARTY DATA**

12 Full Name: \_\_\_\_\_

13 Relationship To You: \_\_\_\_\_

14 Other Names Used: \_\_\_\_\_

15 Home Address: \_\_\_\_\_

16 Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

17 Work Address: \_\_\_\_\_

18 Work Days: \_\_\_\_\_ Work Hours: \_\_\_\_\_

19 Date of Birth: \_\_\_\_\_ And/Or Social Security No: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

20 Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Sex \_\_\_\_\_

21 Scars/Marks/Tattoos Description and Location: \_\_\_\_\_

22 Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License Plate No/State: \_\_\_\_\_

23 **Please Circle Yes or No:**

24 Are you and the Adverse Party living together now? (Yes/No)

25 Is the Adverse Party likely to react violently when served? (Yes/No)

26 Is the Adverse Party likely to avoid service? (Yes/No)

27 Does the Adverse Party have access to weapons? (Yes/No)

28 Does the Adverse Party's history include (please circle): assaults, assaults w/  
weapons, batteries, mental health problems, drug/alcohol abuse,  
outstanding/prior arrest warrants, other? \_\_\_\_\_