

1 **IN THE TRIBAL COURT OF THE WASHOE**
2 **TRIBE OF NEVADA AND CALIFORNIA**

3 Case No. C-WT-_____

4 TPO Applicant,

5 vs.

APPLICATION FOR TEMPORARY
PROTECTION ORDER

6 _____
7
8 Adverse Party/Parties.
9

10 Applicant, above-named, states the following:

11 **Applicant's Information**

12 Date of Birth: _____ Age: _____
13 Month Day Year

14 Applicant's Place of Residence: CONFIDENTIAL (If confidential, still write address below
15 and the clerk will cover it when copying)

16 Physical Address City State Zip Code Colony

17 Applicant has resided at this address for: _____ (circle one) days, months,
18 years.

19 Applicant's Telephone Number: CONFIDENTIAL (If confidential, still write telephone
20 number below and the clerk will cover it when copying)

(_____)

21 Area Code Telephone Number

22 Applicant's Place of Employment: CONFIDENTIAL (If confidential, do not write address below)

23 Physical Address City State Zip Code Colony

24
25 Applicant's Second Place of Employment: CONFIDENTIAL (If confidential, still write address
26 below and the clerk will cover it when copying)

27
28 Physical Address City State Zip Code Colony

1 Applicant's School: CONFIDENTIAL (If confidential, still write address below and the
2 clerk will cover it when copying)

3 Physical Address City State Zip Code Colony

4 Tribal Affiliation (if any): _____

5 I am currently an Enrolled Tribal Member in (List Tribe Name): _____

6 I am a descendant of the Washoe Tribe: Yes No

7 **Adverse Party's Information – (Person You Want Protection From)**

8 Complete this section to the best of your knowledge.

9 Adverse Party Name _____

10 Date of Birth: _____ Age: _____

11 Your application cannot be accepted by the Court without addresses (both post office box and
12 a physical address) for the Adverse Party, where Law Enforcement may serve the Adverse
13 Party.

14 Adverse Party's Place of Residence/Post Office Box with Zip Code

15 Physical Address City State Zip Code

16 Adverse Party's Place of Employment:

17 Physical Address City State Zip Code

18 Adverse Party's Second Place of Employment:

19 Physical Address City State Zip Code

20 Tribal Affiliation (if any): _____

21 Descendant of the Washoe Tribe: Yes No

22 Please Check all that apply:

23 _____ I reasonably believe that the Adverse Party has engaged in the crime of **stalking**
24 pursuant to WTLOC § 5-30-060 (1) against me [Please check if applicable: and against my
25 children].

26 _____ I reasonably believe that the Adverse Party has engaged in **harassment** against me

1 [Please check if applicable: and against my children].

2 _____ I reasonably believe that the Adverse Party has engaged in the following acts of
3 violence against me [Please check if applicable: and against my children].

4 Please include the following minor children in this Protective Order (use additional page if
5 needed):

6 Full Name	Sex	Birthdates	Lives with you?	
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

8 _____ I have applied for protective orders in the past against this individual.

9 Below, Check all that Apply:

- 10 1) Name of all courts where orders have been sought
11 2) Indicate case number of prior order or application, if known)
12 3) Indicate whether the order was issued
13 4) Indicate whether order has expired
14 5) Indicate date order expired

13 Name of Court	Case Number	Issued		Expired		Date Expired
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____

16 _____ I have one or more children in common with the Adverse Party.

17 _____ I currently cohabitate with the Adverse Party.

18 _____ I am related by blood with the Adverse Party.

19 _____ I am married to the Adverse Party.

20 _____ I have a current or prior dating relationship with the Adverse Party.

21 _____ I personally feel terrorized, threatened, or harassed by the Adverse Party.

22 _____ I have personal knowledge that my minor child(ren) feels feel terrorized, threatened, o
23 harassed by the Adverse Party.
24
25
26
27
28

1 INCIDENT STATEMENT – REQUIRED TO BE COMPLETED

2 The Adverse Party has committed acts of stalking or harassment, and/or is committing acts of
3 stalking or harassment, and/or remains a threat to harass (WTLOC § 5-30-060 AND § 5-70-020)
4 and/or stalk (WTLOC § 5-30-060) me or the other proposed protected persons, or done acts that
5 violate other sections of the WTLOC and are directed at me or the protected persons. The events
6 leading up to this request are as follows: BE SPECIFIC as to what act or acts are being committed,
7 against whom and location, approximate dates, indicate whether committed or threatened, identify
8 any acts that include violence or threatened violence.

9 (A COPY OF THIS APPLICATION WILL BE GIVEN TO THE ADVERSE PARTY)

10 _____

11 _____

12 _____

13 _____

14 _____

15 _____

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1 An emergency exists, and I need a Temporary Protective Order issued immediately, without notice to
2 the Adverse Party, to avoid irreparable injury or harm. I request that a Protective Order issue against
3 the Adverse Party including conditions and terms checked below:

4 **1. I request the Court to order the Adverse Party to stay away from (Please check all that
5 apply):**

6 Residence of Applicant (at least 100 yards away)

7 Employment of Protected person(s) (at least 100 yards away)

8 School of Protected person(s) (at least 100 yards away)

9 Other Places Frequented by Applicant (and the protected minor child(ren) (at least 100
10 yards away): _____

11 Other relief requested (specify) (at least 100 yards away):
12 _____

13 If the Court orders the Adverse Party to stay away from all the places listed above, will the
14 Adverse Party, still be able to get to his or her home, school, or job? Yes No

15 If no, please explain: _____
16 _____

17
18 I request a one-time civil standby with a law enforcement officer, within whose jurisdiction
19 Applicant's residence is located, to accompany the Adverse Party to my residence and shall
20 stand by while the Adverse Party obtains clothing and toiletries and the following additional
21 items: _____

22 ANY PROPERTY NOT LISTED ABOVE IN DISPUTE SHALL REMAIN IN THE
23 RESIDENCE.

24 **2. I request the Court to order the Adverse Party NOT to do the following things to me
25 or any of my proposed protected persons that I am requesting to be included in this
26 Protective Order (Please check all that apply):**

27 Contact (either directly or indirectly through agent), through the telephone, sending
28 messages, mail, cyber communication (including through email, social networks)

Intimidate, threaten, harass, strike, assault (sexually or otherwise), hit, follow, stalk, destroy
personal property, keep under surveillance, or block movement.

1 **3. I further request the Court to issue an order that:**

2 Grants temporary custody of the minor child(ren) (listed in this protection order) to the
3 Applicant

4 Other relief requested (specify): _____

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

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

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

15 **DATE:** _____

16 _____
17 Applicant's Signature
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1 **APPLICANT IS REQUIRED TO COMPLETE THIS PAGE:**

2 Instructions to the Applicant: Please provide all information known to you in print format.

3 **List person(s) that are requested to be protected:**

4 Name: _____ DOB: _____ SEX _____
(First, Middle Initial, Last)

5 _____ DOB: _____ SEX _____
6 (First, Middle Initial, Last)

7 _____ DOB: _____ SEX _____
(First, Middle Initial, Last) If there are others, write on the reverse side of this page.

8 **Write as much information here that you know about the Adverse Party:**

9 Full Name: _____

10 Relationship To You: _____

11 Other Names Used: _____

12 Physical/Mailing Address(es): _____

13 Occupation: _____ Employer: _____

14 Work Address: _____

15 Work Days: _____ Work Hours: _____

16 Date of Birth: _____ And/Or Social Security No: _____

17 Hair Color: _____ Eye Color: _____ Height: _____ Weight: _____ Sex _____

18 Scars/Marks/Tattoos Description and Location: _____

19 Vehicle Make: _____ Model: _____ Year: _____ License Plate No/State: _____

20 **Please Circle Yes or No**

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

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

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

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

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

27 **DO NOT WRITE BELOW THIS LINE**-----

1 **RECEIVED BY THE CLERK OF THE COURT OR OTHER COURT DESIGNATED**
2 **OFFICER:**

3 I declare under penalty of perjury under the laws of the Washoe Tribe of Nevada and California
4 that I did not assist the applicant with completing and filing the protection order application. Further,
5 I declare that I did not render any advice or service that requires the professional judgment or an
6 attorney.

7 Date: _____

8
9 _____
10 Court Officer