

**IN THE TULALIP TRIBAL COURT  
TULALIP INDIAN RESERVATION  
TULALIP, WASHINGTON**

<b>Petitioner(s),</b>	<b>D.O.B.</b>	<b>CASE NO.: TUL-CV-AH-_____ - _____</b>
vs.		<b>PETITION FOR HARASSMENT PROTECTION ORDER</b>
<b>Respondent(s).</b>	<b>D.O.B.</b>	

I am petitioning for an Order for Protection against “Unlawful Harassment”.

1.  I am the victim of “Unlawful Harassment” committed by Respondent, as described in the statement below.
2.  I am the parent or guardian of child(ren) under the age of 18 and seek to restrain a person age 18 years of age or over from contact with my child(ren) because contact is detrimental, as described in the statement below.
3.  The “Unlawful Harassment” took place within the boundaries of the Tulalip Indian Reservation.
4.  Respondent lives within the boundaries of the Tulalip Indian Reservation.
5.  I am a member of the Tulalip Tribe.
6.  I am a member of a Federally recognized Indian Tribe: \_\_\_\_\_.
7.  Respondent is a member of the Tulalip Tribe.

Identification of minors (if applicable, use next page if needed):  No minors involved.

NAME (First, Middle, Last)	AGE/DOB	RACE (If American Indian, Tribal Affiliation)	SEX

6. Other court cases or other restraining, protection or no-contact orders involving Petitioner, Respondent or minor child(ren):

<b>CASE NAME</b>			
<b>CASE NUMBER</b>			
<b>COURT/COUNTY</b>			

**REQUEST FOR TEMPORARY ORDER: AN EMERGENCY EXISTS** as described in the statement below. I need a “Temporary” restraining order issued immediately without “Notice” to the Respondent until a “Hearing” to avoid irreparable injury. I request a “Temporary Order for Protection” that will:

**I REQUEST AN ORDER FOR PROTECTION following a hearing THAT WILL:**

	RESTRAIN Respondent from making ANY attempts to keep under surveillance, including cyber and electronic surveillance that includes e-mail, text messaging, and any other social media networking sites such as Facebook, Twitter, and Instagram of: <input type="checkbox"/> Me <input type="checkbox"/> the minors named in paragraph 5 on page 1.
	RESTRAIN Respondent from making ANY attempts to contact, except for mailing of court documents, <input type="checkbox"/> Me <input type="checkbox"/> the minors named in paragraph 5 on page 1.
	EXCLUDE Respondent from ANY place I may RESIDE.
	RESTRAIN Respondent from entering or being within _____ (distance) of my <input type="checkbox"/> Residence <input type="checkbox"/> workplace <input type="checkbox"/> other:
	OTHER:
	REMAIN EFFECTIVE longer than 1 year because Respondent is likely to resume acts of unlawful harassment AGAINST me if the order EXPIRES in 1 year.
	REQUIRE the Respondent to pay the fees and costs of this action.

**Unlawful harassment** means a knowing and willful course of conduct directed at a specific person which seriously harms, annoys, or harasses, or is determined to such person and which serves no legitimate or lawful purpose. The course of conduct shall be such as would cause a reasonable person to suffer substantial emotional distress or would cause a reasonable person to fear for well-being of their family and shall actually cause the Petitioner substantial emotional distress or fear for the well-being of his or her family. Course of conduct means a pattern of conduct composed of a serious of acts over a period of time, however short, evidencing a continuity of purpose. “Course of conduct” includes, but is not limited to, in addition to any other form of communication the sending of an electronic communication. See *Tulalip Tribe’s Harassment Code Title 4.25, Article VIII, Sections 4.25.740 – 4.25.830.*

STATEMENT: The Respondent has committed acts of “Unlawful Harassment” as follows. (Describe SPECIFIC acts of harassment and their approximate DATES, beginning with the most RECENT act. You may want to include Police Responses/Reports). Attach additional pages, if necessary.

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If you request a fee waiver, describe the incident(s) involving stalking, a sex offense, or domestic violence: (Attach additional pages, if necessary.)

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I certify under penalty of perjury under the laws of the **Tulalip Tribes** and/or the **State of Washington** that the foregoing is true and correct.

**DATED** this \_\_\_\_\_ at \_\_\_\_\_, Washington.

\_\_\_\_\_  
**Petitioner**

Keep Address Confidential - You have a right to keep your residential address confidential. You may list an address that is not your residential address where you agree to accept legal documents.  Address you would like your mail delivered: \_\_\_\_\_

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**LAW ENFORCEMENT INFORMATION**

**Do NOT serve or show this sheet to the restrained person!**  
**Do NOT FILE in the court file. Give this form to law enforcement.**

**Type or print clearly!** This completed form is **required** by law enforcement. This information is **necessary** to serve, enforce and enter your order into the state wide law enforcement computer. Fill in the following information as completely as possible.

Court: TULALIP TRIBAL COURT	Case Number:
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<input type="checkbox"/> Domestic Violence	<input type="checkbox"/> Dissolution/Separation/Invalidity/Nonparental Custody/Paternity
<input type="checkbox"/> Unlawful Harassment	<input type="checkbox"/> Vulnerable Adult
	<input type="checkbox"/> Sexual Assault

**Restrained Person's Information** (This is the person that you want the court to restrain.)

<b>Name:</b> First Middle Last			Nickname		Relationship to Protected Person			
Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build
Last Known Address Street: City:					Phone(s) w/Area Code		Need Interpreter? <b>Yes</b> or <b>No</b> Language:	
Employer		Employer's Address			WORK Hours: Phone: ( )			
Vehicle License Number	Vehicle Make and Model	Vehicle Color	Vehicle Year	Drivers License or ID number		State		

**Does the restrained person have a disability, brain injury, or impairment requiring special assistance** when law enforcement serves the order?  No  Yes. If yes, describe (continue on back, if needed):

**Hazard Information** Restrained Person's History Includes:

Involuntary/Voluntary Commitment  Suicide Attempt or Threats

Assault  Assault with Weapons  Alcohol/Drug Abuse  Other:

**Weapons:**  Handguns  Rifles  Knives  Explosives  Other:

**Location of Weapons:**  Vehicle  On Person  Residence Describe in detail:

**Current Status** (Circle Yes, No or N/A.) Is the restrained person a current or former cohabitant as an intimate partner? **Y N**  
 Are you and the restrained person living together now? **Y N** Does the restrained person know he/she may be moved out of the home? **Y N N/A**  
 Does the restrained person know you're trying to get this order? **Y N** Is the restrained person likely to react violently when served? **Y N**

**Protected Person's Information** (This is the person you want the court to protect.)

<b>Name:</b> First Middle Last								
Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build
If your information <b>is not confidential</b> , you must enter your address and phone number(s).								
Current Address Street: City:					Phone(s) w/Area Code		Need interpreter? <b>Yes</b> or <b>No</b> Language:	
If your information <b>is confidential</b> , you must provide the name, address and phone number of someone willing to be your "contact."								
Contact Name			Contact Address			Contact Phone		

If you filed for someone else, list your name, phone number and address:

Minor's Information			Describe the minor's relationship using terms such as: child, grandchild, stepchild, nephew, none. →				Minor's Relationship to Protected Person	
Name: First	Middle	Last	Sex	Race	Birth date	Resides With	Person	Person

<b>Victim's Household Members or Adult Children Protected</b>		Name:	birth date:
Name:	birth date:	Name:	birth date:

**TULALIP TRIBAL COURT**  
Tulalip, Washington

No. \_\_\_\_\_

**Temporary Order for Harassment Protection and Notice of Hearing**  
(Clerk's Action Required)

**Next Hearing Date/Time:** \_\_\_\_\_

**At: Tulalip Tribal Court**  
**6332 31<sup>st</sup> Ave. N.E. Suite B**  
**Tulalip, WA 98271**

\_\_\_\_\_ **DOB** \_\_\_\_\_  
Petitioner vs.  
\_\_\_\_\_ **DOB** \_\_\_\_\_  
Respondent

**Respondent Identifiers**

Sex	Race	Hair
Height	Weight	Eyes

No Minors Involved

**Respondent's Distinguishing Features:** \_\_\_\_\_

**Caution: Access to weapons:**  yes  no  unknown

**Identification of Minors:**

NAME (First, Middle, Last)	AGE/DOB	RACE (If American Indian, Tribal Affiliation)	SEX

**The Court Finds:**

The court has jurisdiction over the parties, the minors, and the subject matter. The respondent will be served notice of his or her opportunity to be heard at the scheduled hearing. For good cause shown, the court finds that an emergency exists and that a Temporary Harassment Protection Order should be issued without notice to the respondent to avoid irreparable harm.

**The Court Orders:**

The terms of this order shall be effective until:

**the end of the hearing, noted above.**

Based upon the petition, testimony, and case record, the court finds that the **Respondent** has committed “**Unlawful Harassment**” as defined in See *Tulalip Tribe’s Harassment Code Title 4.25, Article VIII, Sections 4.25.740 – 4.25.830.* and **IT IS THEREFORE ORDERED THAT:**

	Respondent is RESTRAINED from making ANY attempts to keep under surveillance, including cyber and electronic surveillance that includes e-mail, text messaging, and any other social media networking sites including but not limited too Facebook, Twitter, Instagram MySpace, LinkedIn, etc., of: Petitioner and ANY Minors named in paragraph 2 on page 1.
	Respondent is RESTRAINED from making ANY attempts to contact Petitioner and ANY Minors, named in paragraph 2 on page 1.
	Respondent is RESTRAINED from entering or being within _____ (distance) of Petitioner’s <input type="checkbox"/> Residence <input type="checkbox"/> Place of employment <input type="checkbox"/> other: _____ <input type="checkbox"/> Petitioner’s address is confidential <input type="checkbox"/> Petitioner waives confidentiality of the address which is: _____
	Other: _____ _____ _____

The respondent is directed to appear and show cause why this temporary order should not be made effective for one year or more and why the court should not order the relief requested by the petitioner or other relief which may include electronic monitoring, payment of costs, and treatment. ***Failure to Appear at the Hearing May Result in the Court Granting Such Relief. The Next Hearing Date is Shown on Page One***

**Unlawful harassment** means a knowing and willful course of conduct directed at a specific person which seriously harms, annoys, or harasses, or is determined to such person and which serves no legitimate or lawful purpose. The course of conduct shall be such as would cause a reasonable person to suffer substantial emotional distress or would cause a reasonable person to fear for well-being of their family and shall actually cause the Petitioner substantial emotional distress or fear for the well-being of his or her family. "Course of conduct" means a pattern of conduct composed of a serious of acts over a period of time, however short, evidencing a continuity of purpose. "Course of conduct" includes, but is not limited to, in addition to any other form of communication the sending of an electronic communication. See *Tulalip Tribe's Harassment Code Title 4.25, Article VIII, Sections 4.25.740 – 4.25.830.*

PROTECTION ORDER DATA ENTRY

It is further ordered that the clerk of the court shall forward a copy of this order on or before the next judicial day to  Tulalip Police Department

Snohomish County Sheriff's Office  City Police Department ***Where Petitioner Lives***

\_\_\_\_\_ which shall enter it in a computer based criminal intelligence system available in this state used by law enforcement to list outstanding warrants.

SERVICE

The clerk of the court shall also forward a copy of this order on or before the next judicial day to

Tulalip Police Department

Police Department ***Where Respondent Lives*** which shall personally serve the respondent with a copy of this order and shall promptly complete and return to this court proof of service.

Petitioner has made private arrangements for service of this order.

Dated: \_\_\_\_\_ at \_\_\_\_\_ a.m. /p.m.

\_\_\_\_\_  
**Judge**

Presented by:

A Law Enforcement Information Sheet (LEIS) must be completed.

\_\_\_\_\_  
Petitioner

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**Type or print clearly!** This completed form is **required** by law enforcement. This information is **necessary** to serve, enforce and enter your order into the state wide law enforcement computer. Fill in the following information as completely as possible.

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<input type="checkbox"/> Domestic Violence	<input type="checkbox"/> Dissolution/Separation/Invalidity/Nonparental Custody/Paternity
<input type="checkbox"/> Unlawful Harassment	<input type="checkbox"/> Vulnerable Adult
	<input type="checkbox"/> Sexual Assault

**Restrained Person's Information** (This is the person that you want the court to restrain.)

<b>Name:</b> First	Middle	Last	Nickname	Relationship to Protected Person
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Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build
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Last Known Address Street:			Phone(s) w/Area Code		Need Interpreter? <b>Yes or No</b> Language:	
City:		State:	Zip:			

Employer	Employer's Address	WORK Hours: Phone: ( )
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Vehicle License Number	Vehicle Make and Model	Vehicle Color	Vehicle Year	Drivers License or ID number	State
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**Does the restrained person have a disability, brain injury, or impairment requiring special assistance** when law enforcement serves the order?  No  Yes. If yes, describe (continue on back, if needed):

**Hazard Information** Restrained Person's History Includes:  
 Involuntary/Voluntary Commitment  Suicide Attempt or Threats  
 Assault  Assault with Weapons  Alcohol/Drug Abuse  Other:  
**Weapons:**  Handguns  Rifles  Knives  Explosives  Other:

**Location of Weapons:**  Vehicle  On Person  Residence **Describe in detail:**

**Current Status** (Circle Yes, No or N/A.) Is the restrained person a current or former cohabitant as an intimate partner? **Y N**  
 Are you and the restrained person living together now? **Y N** Does the restrained person know he/she may be moved out of the home? **Y N N/A**  
 Does the restrained person know you're trying to get this order? **Y N** Is the restrained person likely to react violently when served? **Y N**

**Protected Person's Information** (This is the person you want the court to protect.)

<b>Name:</b> First	Middle	Last
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Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build
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If your information **is not confidential**, you must enter your address and phone number(s).

Current Address Street:			Phone(s) w/Area Code		Need interpreter? <b>Yes or No</b> Language:	
City:		State:	Zip:			

If your information **is confidential**, you must provide the name, address and phone number of someone willing to be your "contact."

Contact Name	Contact Address	Contact Phone
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If you filed for someone else, list your name, phone number and address:

Minor's Information	Describe the minor's relationship using terms such as: child, grandchild, stepchild, nephew, none. →				Minor's Relationship to Protected Person		Minor's Relationship to Restrained Person		
	Name: First	Middle	Last	Sex	Race	Birth date	Resides With	Person	Person

<b>Victim's Household Members or Adult Children Protected</b>	Name:	birth date:
Name:	birth date:	Name:
		birth date: