

IN THE TULALIP TRIBAL COURT
TULALIP INDIAN RESERVATION
TULALIP, WASHINGTON

Petitioner	DOB
vs.	
Respondent	DOB

No. TUL-CV-PO-____ - _____

**Petition for Order for Protection
Domestic Violence**

ADDRESS CONFIDENTIAL

1. <input type="checkbox"/> Petitioner: I am a victim of domestic violence, dating violence, family violence, or stalking committed by the respondent.		
<input type="checkbox"/> I am a member of the Tulalip Tribes.		
<input type="checkbox"/> I am a member of a federally recognized Indian Tribe: _____		
<input type="checkbox"/> Petitioner: <input type="checkbox"/> A minor child of mine or <input type="checkbox"/> a vulnerable adult is a victim of domestic violence committed by the respondent.		
<input type="checkbox"/> The child or vulnerable adult is a member of the Tulalip Tribes.		
<input type="checkbox"/> The child or vulnerable adult is a member of a federally recognized Indian Tribe: _____ (list tribe)		
<input type="checkbox"/> Petitioner is beda?chelh, the Tulalip child protection agency, and a minor child deemed dependent by the Court is a victim of domestic or family violence committed by the respondent.		
2. <input type="checkbox"/> The victim lives on the Tulalip Indian Reservation.		
<input type="checkbox"/> The victim lives outside the exterior boundaries of the Tulalip Indian Reservation.		
<input type="checkbox"/> The victim left their residence because of abuse and the Tulalip Indian Reservation was/is a new or former residence.		
3. The victim's age is: _____ Respondent's age is: _____ <input type="checkbox"/> Under 16 <input type="checkbox"/> 16 or 17 <input type="checkbox"/> 18 or over <input type="checkbox"/> Under 16 <input type="checkbox"/> 16 or 17 <input type="checkbox"/> 18 or over		
4. The Petitioner/Protected party's relationship with the respondent is:		
<input type="checkbox"/> spouse or former spouse	<input type="checkbox"/> current or former cohabitant as roommate	<input type="checkbox"/> stepparent
<input type="checkbox"/> parent of a child in common	<input type="checkbox"/> current or former domestic partner	<input type="checkbox"/> stepchild
<input type="checkbox"/> current or former dating relationship	<input type="checkbox"/> blood relation other than parent or child	<input type="checkbox"/> parent <input type="checkbox"/> child <input type="checkbox"/> in-law

5. Identification of Minors (if applicable) No Minors involved.

Name (First, Middle Initial, Last)	Age	Race	Sex	How Related to Petitioner Respondent		Resides with

6. Respondent Information

Name (Full legal)	Age:	Race:	Height:	Weight:
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Eyes:	Hair:
Tulalip Tribal Member:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other Native:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Tribe:
Address	City	State	Zip Code	Home Phone
Employer Address	City	State	Zip Code	Work Phone
Vehicle Make:	Model:	Tag No.:		

7. Other court cases or other restraining, protection or no-contact orders involving me, the minors and the respondent:

Have you and the Respondent been involved in another court case? YES NO

If yes, where? County/Reservation: _____ State: _____

Case No.	Case No.
Case No.	Case No.

What kind of case? (check all that apply):

- Domestic Partnership Divorce/Dissolution Parentage/Paternity Legal Separation Civil Harassment Domestic Violence Criminal Juvenile Child Support Other (specify): _____

Are there any domestic violence restraining/protective orders now (criminal, juvenile, family)?

- Yes No – If yes, attach a copy if you have one.

I Request an Order for Protection following a hearing that will:

1. **Restrain** respondent from causing any physical harm, bodily injury, assault, including sexual assault, and from molesting, harassing, threatening, or stalking me the minors named in paragraph 5 above these minors only:

If the court orders this relief, and the respondent is your spouse or former spouse, current or former domestic partner, the parent of a child in common, or a current or former cohabitant as part of a dating relationship, the respondent **will not be** able to obtain or possess a firearm, other dangerous weapon, ammunition, or concealed pistol license under tribal, state or federal law for the duration of the order.

If the respondent is a family member, the court **may** restrict the respondent from obtaining or possessing a firearm, other dangerous weapon, ammunition or concealed pistol license under tribal, state, or federal law for the duration of the order.

2. **Restrain** respondent from harassing, following, keeping under physical or electronic surveillance, cyberstalking, or using telephonic, audiovisual, or other electronic means to monitor the actions, locations, or wire or electronic communication of me the minors named in paragraph 5 above only the minors listed below, members of the victim's household listed below the victim's adult children listed: _____

3. **Restrain** respondent from coming near and from having any contact whatsoever, in person or through others, by phone, mail, email, social media including but not limited to Facebook, Twitter, LinkedIn, etc., or any means, directly or indirectly, except for mailing of court documents, with me the minors named in paragraph 5 above, subject to any court-ordered visitation these minors only, subject to any court-ordered visitation:

4. **Exclude** respondent from our shared residence my residence my workplace my school the residence, day care, or school of the minors named in paragraph 5 above these minors only: _____
 other:

You have a right to keep your residential address confidential.

5. **Direct** respondent to vacate our shared residence and restore it to me.

6. **Prohibit** respondent from knowingly coming within, or knowingly remaining within _____ (distance) of our shared residence my residence my workplace my school the day care or school of the minors named in paragraph 5 above. these minors only: _____

other:

7. **Grant** me possession of essential personal belongings, including the following:

8. **Grant** me use of the following vehicle:

Year, Make & Model _____ License No. _____

9. **Other:**

Protection involving a minor (complete only if minors are involved):

10. Subject to any court-ordered visitation, **Grant** me the care, custody and control of the minors named in paragraph 5 above these minors only: _____

11. **Restrain** respondent from interfering with my physical or legal custody of the minors named in paragraph 5 above these minors only: _____

12. **Restrain** the respondent from removing from the state: the minors named in paragraph 5 above these minors only: _____

Additional Requests:

13. **Direct** the respondent to participate in appropriate treatment or counseling services.

14. **Require** the respondent to pay ANY fees and costs of this action.

15. **Remain Effective** longer than one year because respondent is likely to resume acts of domestic violence against me if the order expires in a year.

Protection from Firearms and Other Dangerous Weapons

16. **Require** the respondent to surrender any firearm or other dangerous weapon, or any concealed pistol license, and prohibit the respondent from obtaining or possessing a firearm or other dangerous weapon, or a concealed pistol license.

Notice: If you are the respondent's intimate partner, after actual notice and an opportunity to be heard at the hearing, the court may be required to order the respondent to surrender firearms, other dangerous weapons, or concealed pistol license.

I want emergency temporary protection effective immediately, that lasts (up to 14 days) until the court hearing:

An emergency exists as described below. I request that a **Temporary Order for Protection** granting the relief requested above in 1) through 12) be issued immediately, without prior notice to the respondent, to be effective until the hearing.

I also request temporary surrender of a firearm or other dangerous weapon without notice to the other party because irreparable injury could result if an order is not issued until the hearing.

What irreparable harm would result if an order is not issued immediately without prior notice to the respondent?

Request for Special Assistance from Law Enforcement Agencies:

17. I request the court order the appropriate law enforcement agency to assist me in obtaining:

Possession of my residence. Possession of the vehicle designated above.

Possession of my essential personal belongings at:

shared residence respondent's residence.

other location _____.

Custody of the minors named in paragraph 5 above these minors only (if applicable):

_____.

Other: _____

_____.

“Domestic violence” means physical harm, bodily injury, assault, including sexual assault, stalking, **Or** inflicting fear of imminent physical harm, bodily injury or assault between family or household members.

Statement: The respondent has committed acts of domestic violence as follows. (Describe specific acts of domestic violence and their approximate dates, beginning with the most recent act. You may want to include police responses.)

Describe the most recent violent act, fear or threat of violence, and why the temporary order should be entered today without notice to the respondent: _____

_____.

Describe the past incidents where you experienced violence, where you were afraid of injury or where the respondent threatened to harm or kill you: _____

_____.

Describe any violence or threats towards children: _____

_____.

Describe any stalking behavior by respondent, including use of telephonic, audiovisual or electronic means to harass or monitor: _____

Describe medical treatment you received and for what: _____

Describe any threats of suicide or suicidal behavior by the respondent: _____

Does the respondent own or possess firearms? Yes No
Does the respondent use firearms, weapons or objects to threaten or harm you? Please describe: _____

Has the respondent used, displayed, or threatened to use a firearm or other dangerous weapon in a felony? If yes, please describe: _____

Has the respondent previously committed an offense that makes him or her ineligible to possess a firearm under the provisions of Tulalip Tribal Code §4.25.560 or RCW §9.41.040? If yes, please describe: _____

Does possession of a firearm or other dangerous weapon by the respondent present a serious and imminent threat to public health or safety, or to the health or safety of any individual? Please describe: _____

If you are requesting that the protection order lasts longer than one year, describe the reasons why: _____

_____.

Other: _____

_____.

(Continue on separate page if necessary.)

Check box if substance abuse is involved: alcohol drugs other

Personal service cannot be made upon respondent within the State of Washington.

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

Date:_____.

Signature of Petitioner

You have a right to keep your residential address confidential. Please provide an address, other than your residence, where you may receive legal documents:_____

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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Domestic Violence Dissolution/Separation/Invalidity/Nonparental Custody/Paternity
 Unlawful Harassment Vulnerable Adult Sexual Assault

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

Name: 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: City:				State: Zip:	Phone(s) w/Area Code	Need Interpreter? Yes or No Language:
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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.)

Name: 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: City:				State: Zip:	Phone(s) w/Area Code	Need interpreter? Yes or No Language:
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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 Restrained Person	
Name: First	Middle	Last	Sex	Race	Birth date	Resides With	Person	Person

Victim's Household Members or Adult Children Protected		Name:	birth date:
Name:	birth date:	Name:	birth date:

TULALIP TRIBAL COURT
Tulalip, Washington

No. TUL-CV-PO-_____ - _____

Temporary
Order for Protection –
Domestic Violence

Petitioner (First, Middle, Last Name) **DOB**

v.

Respondent (First, Middle, Last Name) **DOB**

Court Address: 6332 31st AVE NE Suite B
Tulalip WA 98271
Tel: (360)716-4773 | Fax: (360) 716-0657

(Clerk's Action Required)
ORDER VALID UNTIL NEXT HEARING DATE/TIME:

_____ **AT** _____ **AM/PM**

Respondent Identifiers

No Minors Involved

Sex	Race	Hair
Height	Weight	Eyes

Caution: Access to weapons: yes no
 unknown

Respondent's Distinguishing Features:

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 Protection Order should be issued without notice to the respondent to avoid irreparable harm.

It is hereby Ordered:

1. Respondent is **Restrained** from causing petitioner physical harm, bodily injury, assault, including sexual assault, and from molesting, harassing, threatening, or stalking petitioner the minors named in the table above these minors only:

2. Respondent is **Restrained** from harassing, following, keeping under physical or electronic surveillance, and using telephonic, audiovisual, or other electronic means to monitor the actions, locations, or wire or electronic communication of petitioner the minors named in the table above only the minors listed below members of the victim's household listed below the victim's adult children listed below:

3. Respondent is **Restrained** from coming near and from having any contact whatsoever, in person or through others, by phone, mail, or any means, directly or indirectly, except for mailing or service of process of court documents by a 3rd party or contact by respondent's lawyer(s) with petitioner the minors named in the table above these minors only: _____

4. Respondent is **Restrained** from going onto the grounds of or entering petitioner's residence workplace school the day care or school of the minors named in the table above these minors only:

Other: _____

Petitioner's/protected party's address is confidential.

Petitioner/protected party waives confidentiality of the address which is: _____

5. Petitioner/protected party shall have exclusive right to the residence petitioner/protected party and respondent share. The respondent shall immediately **Vacate** the residence. The respondent may take respondent's personal clothing and respondent's tools of trade from the residence while a law enforcement officer is present.

This address is confidential. Petitioner/protected party waives confidentiality of this address which is: _____

6. Respondent is **Prohibited** from knowingly coming within, or knowingly remaining within **1000 feet** (distance) of: petitioner's/protected party's residence workplace school the day care or school of the minors named in the table above

these minors only: _____

Other: _____

7. Petitioner/protected party shall have possession of essential personal belongings, including the following: _____

8. Petitioner/protected party is granted use of the following vehicle:

Year, Make & Model _____ License No. _____

9. **Other.** _____

ONLY COMPLETE IF PROTECTION INVOLVES A MINOR

16. Petitioner is **Granted** the temporary care, custody, and control of the minors named in the table above these minor only: _____

17. Respondent is **Restrained** from interfering with petitioner's physical or legal custody of the minors named in the table above these minors only:

18. Respondent is **Restrained** from removing from the state the minors named in the table above these minors only: _____

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. The Order is valid and in effect until the next hearing date and time unless extended by Court Order.**

Warnings to Respondent: A violation of provisions 1 through 6 of this order with actual notice of its terms is a criminal offense under chapter 4.25 TTC and will subject you to arrest. If the violation of the protection order involves travel across a state line or the boundary of a tribal jurisdiction, or involves conduct within the special maritime and territorial jurisdiction of the United States, which includes tribal lands, you may be subject to criminal prosecution in federal court under 18 U.S.C. § 2261, 2261A, or 2262.

If you are NOT a member of a federally-recognized Indian Tribe, the Tulalip Criminal Code may apply or Washington State law may apply.

If the court issues a final protection order, and your relationship to the petitioner is that of spouse or former spouse, parent of a common child, or former or current cohabitant as intimate partner, including a current or former registered domestic partner, you may not possess a firearm or ammunition for as long as that final protection order is in effect. 18 U.S.C. § 922(g)(8). A violation of this federal firearms law carries a maximum possible penalty of 10 years in prison and a \$250,000 fine. An exception exists for law enforcement officers and military personnel when carrying department/government-issued firearms. 18 U.S.C. § 925(a)(1). If you are convicted of an offense of domestic violence, you will be forbidden for life from possessing a firearm or ammunition. 18 U.S.C. § 922(g)(9).

You Can Be Arrested Even if the Person or Persons Who Obtained the Order Invite or Allow You to Violate the Order's Prohibitions. You have the sole responsibility to avoid or refrain from violating the order's provisions. Only the court can change the order upon written application.

Pursuant to 18 U.S.C. § 2265, a court in any of the 50 states, the District of Columbia, Puerto Rico, any United States territory, and any tribal land within the United States shall accord full faith and credit to the order.

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 _____ County Sheriff's Office - which shall enter it in a computer-based criminal intelligence system used by law enforcement to list outstanding warrants and protection orders.

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 Snohomish County Sheriff's Office _____ County Sheriff's Office _____ city 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 shall serve this order by regular mail and certified mail
- Petitioner shall serve this order by Publication pursuant to TTC Ch. 2.10 Sec. 2.10.030(2)(e).
- Petitioner shall make private arrangements for service of this order.

LAW ENFORCEMENT

- Law enforcement shall assist petitioner in obtaining:
- Possession of petitioner's residence personal belongings located at: the shared residence respondent's residence other: _____
- Custody of the above-named minors, including taking physical custody for delivery to petitioner.
- Possession of the vehicle designated in paragraph 7, above.
- Other: _____

Dated: _____ at _____ a.m./p.m. _____

JUDGE

Presented by: _____
_____ Petitioner or _____ Attorney for Petitioner

LAW ENFORCEMENT INFORMATION

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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.)

Name:	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				Phone(s) w/Area Code	Need Interpreter? Yes or No
Street:					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.)

Name:	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				Phone(s) w/Area Code	Need interpreter? Yes or No
Street:					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	
Name: First	Middle	Last	Sex	Race	Birth date	Resides With	Protected Person	Restrained Person

Victim's Household Members or Adult Children Protected	Name:	birth date:
Name:	birth date:	Name:
	birth date:	birth date: