

COURT CODE: \_\_\_\_\_

DISTRICT COURT (check if filing in Washoe or Clark County or against a minor)

JUSTICE COURT IN THE TOWNSHIP OF \_\_\_\_\_  
\_\_\_\_\_ COUNTY, NEVADA

\_\_\_\_\_  
Applicant (print your name above),

CASE NO.: \_\_\_\_\_

vs.

DEPT: \_\_\_\_\_

\_\_\_\_\_  
Adverse Party (print the name of the person you  
want protection from above).

Adverse is a(n)  Adult  Minor

**APPLICATION FOR PROTECTION ORDER AGAINST DOMESTIC  
VIOLENCE**

1. **Your information.** (you are the "Applicant")

Your name: \_\_\_\_\_  
(first) (middle) (last)

Interpreter Needed?  No  Yes: (language?) \_\_\_\_\_

2. **Who do you want protection from?** (this person is the "Adverse Party")

Name: \_\_\_\_\_  
(first) (middle) (last)

Is this person currently in jail or prison?  No  Yes: (where?) \_\_\_\_\_

3. **Who needs protection?** ( check one or both)

Me.

The minor child(ren) below. (fill out the chart below and a UCCJEA Declaration,  
available at <http://selfhelp.nvcourts.gov/>)

Child's Name	Date of Birth	Parents
		Parent 1: _____ Parent 2: _____
		Parent 1: _____ Parent 2: _____
		Parent 1: _____ Parent 2: _____
		Parent 1: _____ Parent 2: _____

4. **Why do you need protection from the person named above?** ( check all that apply)

The adverse party committed an act of domestic violence against me or has threatened to commit an act of domestic violence against me.

The adverse party committed an act of domestic violence against a minor child or has threatened to commit an act of domestic violence against the child.

I am the child's  parent or  legal guardian.

***\*If filing only on behalf of a minor child, answer the later questions about what happened as they apply to the actions/incident involving the child.***

5. **How are you related to the person you want protection from?** ( check all that apply)

***You must be a current/former intimate partner, or be related by blood, adoption, or marriage, or be the parent or guardian of the adverse party's child to apply for a domestic violence protection order.***

***\*Do not use this form if you want protection from an adult sibling or an adult cousin. Adult siblings and cousins do not qualify to get a domestic violence protection order. You may be able to apply for a different kind of protection order.***

We are married or used to be married.

We are dating or used to date.

We have children together.

Other: The adverse party is my (specify relationship): \_\_\_\_\_.

6. **Are there any other current or prior court cases that involve you and the adverse party?**

No.

Yes. If you know, list the case type, county, state, and case number:

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7. **Firearms / Guns.** Does the adverse party own a gun or have a gun in his/her possession or control?  No  Yes  I don't know

***If you request an extended order, there will be a hearing where the judge may order the other person to surrender, sell, or transfer any firearm, and may prohibit the other person from having a gun. If the other person needs a gun for work, he / she may be allowed to possess a firearm while on duty. This will be discussed at the hearing for an extended order.***





10. **Temporary Protections Requested.** ( *check all that apply*)

***Do not list any confidential addresses.  
The other person will get a copy of this application and will see any  
addresses you write down.***

**Prohibited Activities.** The adverse party should not threaten, physically injure, or harass me and/or the minor child(ren), either directly or through someone acting on his/her behalf.

**Contact with You.** The adverse party should:

- Not contact me at all, either in person, by phone/text, by email, or through social media.
- Contact me to discuss parenting issues only by:  text  email  
 phone calls  in writing  other: \_\_\_\_\_

**Contact with Children.** The adverse party should:

- Not contact the minor children at all, either in person, by phone/text, by email, or through social media.
- Contact the children by:  text  email  phone calls  in writing  
 other: \_\_\_\_\_

**Current Residence.** The adverse party should stay away from my current residence. Do you and the adverse party live together?  No  Yes  
If yes, whose name is listed on the lease/title? \_\_\_\_\_  
If yes, when did you start living together? \_\_\_\_\_

Does the adverse party know where you live?  No  Yes (*write your address below*)  
If no, is your address confidential?  No (*write address below*)  Yes (*leave address blank*)

*Write your address here if the other person knows where you live and you want them to stay away. >>>>*

\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State, Zip Code County

This is a:  temporary address  permanent address

Do you and the adverse party live in the same complex/property/trailer park?

- No. Should the Adverse Party stay away from the entire complex / property / trailer park?  No  Yes
- Yes. Explain the distance and need for protection in that complex / property / trailer park: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Personal Belongings.**

I need to get my belongings. I want law enforcement to come with me to the adverse party's residence so I can pick up my belongings. The address I need to go to is *(list street address, apartment number, city, state, zip)*: \_\_\_\_\_.

The other person needs to get their belongings. Law enforcement should come with the adverse party to my residence to pick up their belongings.

**Work.** The adverse party should stay away from my workplace.

Do you and the adverse party work at the same place?  No  Yes

Is your work address confidential?  No  Yes *(do not write details below)*

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code County

\_\_\_\_\_  
City, State, Zip Code County

**School / Day Care.** The adverse party should stay away from my school and/or the child(ren)'s school/day care.

Is the school address confidential?  No  Yes *(do not write details below)*

\_\_\_\_\_  
School/Day Care Name

\_\_\_\_\_  
School/Day Care Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code County

\_\_\_\_\_  
City, State, Zip Code County

**Other Places.** The adverse party should stay away from the following places that I and/or the minor child(ren) go to regularly.

\_\_\_\_\_  
Location Name

\_\_\_\_\_  
Location Name

\_\_\_\_\_  
Why?

\_\_\_\_\_  
Why?

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code County

\_\_\_\_\_  
City, State, Zip Code County

**Children / Custody Orders.** I want temporary custody of the child(ren).  
*\*you must complete a UCCJEA Declaration to give more information\**

The adverse party should not have visitation at this time.

The adverse party should have visitation with the child(ren) as follows:

\_\_\_\_\_.

We already have a custody/visitation order that we should keep following.

The order is from case (*case number*) \_\_\_\_\_. It was issued  
in (*county*) \_\_\_\_\_ County in the State of \_\_\_\_\_.

**Pets or Animals – Safety.** The adverse party should be ordered not to threaten, physically injure or harass any pets/animals kept by me, the children, or the adverse party, either directly or through someone acting on his/her behalf.

**Pets or Animals – Possession.** I want to keep the pets/animals. The adverse party should be prohibited from taking the pets/animals either directly or through someone acting on his/her behalf.

**About Extended Protection Orders:**

*This application automatically asks the judge to issue up to a 45 day temporary protection order without notifying the other person first. You will get a decision within 1 business day.*

***You can also ask for an extended order that could last for up to 2 years.**  
If you do, the judge will set a hearing. You and the other person will have to appear in court and explain your side before the judge can extend the protection order.*

**11. Length of Protection Order.**

**I want an order up to 45-days only.** Stop here and go to Q12.

**I want an order up to 45-days PLUS an extended order that could last up to 2 years.** The extended order should require the adverse party to do the following in addition to the temporary requests I already asked for:

***\*You may have to fill out and file a financial form if you want the judge to grant you any kind of financial support.***

\*Pay rent or mortgage payments for my place of residence.

\*Pay emergency household support for me.

\*Pay child support for the minor child(ren) we have together.

\*Pay for lost earnings and expenses incurred as a result of my attendance at any hearing concerning this application.

\*Pay any costs and fees I have spent in pursuing this case.

- The judge should make the following long-term arrangement for the pets/animals owned by myself, the child(ren), and/or the adverse party *(describe the pets/animals involved and who should take care of the pets/animals while an extended order is in effect)* \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- 12. **UCCJEA Declaration.** If you want the judge to grant you temporary custody of a child, fill out a UCCJEA Declaration and file it with this application.
- 13. **Exhibits.** You may attach documents, pictures, or anything else that you would like the judge to look at and consider when reviewing your application. The Adverse Party will receive a copy of all documents/evidence you provide.

**Describe what you are attaching:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- 14. This document does not contain the personal information of any person as defined by NRS 603A.040.

**I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.**

DATED \_\_\_\_\_, 20\_\_\_\_.

Submitted by: *(your signature)*   /s/    
*(print your name)* \_\_\_\_\_

**VERIFICATION**

I declare that I am the Applicant in the above-entitled action; that I have read the foregoing application and know the contents thereof; that the pleading is true of my own knowledge, except for those matters therein contained stated upon information and belief, and that as to those matters, I believe them to be true.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

Submitted by: *(your signature)*   /s/    
*(print your name)* \_\_\_\_\_