

4-972

STATE OF NEW MEXICO  
COUNTY OF MCKINLEY  
ELEVENTH JUDICIAL DISTRICT COURT

STATE OF NEW MEXICO ON BEHALF OF:

\_\_\_\_\_ Petitioner

v.

No. D-1113-DV \_\_\_\_\_

\_\_\_\_\_ Respondent

**PETITION FOR EMERGENCY ORDER OF PROTECTION  
FROM DOMESTIC ABUSE<sup>1</sup>**

**1. INFORMATION ABOUT THE RESPONDENT**

The respondent is:

- the husband of  wife of petitioner
- the ex-husband of  ex-wife of petitioner
- a family member of petitioner (*describe relationship*) \_\_\_\_\_

a person with whom petitioner has had a continuing personal relationship.  
(*describe relationship*) \_\_\_\_\_

a person who has sexually assaulted me

a person who has stalked me

\_\_\_\_\_ **Petitioner's initials**

**2. CHILD(REN)**

List minor child(ren) who may be in immediate danger or in need of an order of temporary custody.

| Name  | Year of Birth | Relationship of Child |               |
|-------|---------------|-----------------------|---------------|
|       |               | To Petitioner         | To Respondent |
| _____ | _____         | _____                 | _____         |
| _____ | _____         | _____                 | _____         |
| _____ | _____         | _____                 | _____         |
| _____ | _____         | _____                 | _____         |
| _____ | _____         | _____                 | _____         |

\_\_\_\_\_ **Petitioner's initials**

**3. DOMESTIC ABUSE**

A. The respondent committed the following act(s) of domestic abuse against petitioner or the petitioner's child(ren) (*describe in detail what happened and when and where*)

**Physical abuse:** \_\_\_\_\_  
\_\_\_\_\_.

**Date of abuse:** \_\_\_\_\_

**Location of abuse (address):** \_\_\_\_\_

**Threats which caused fear that \_\_\_\_\_ or any household member would be injured:** \_\_\_\_\_  
\_\_\_\_\_.

**Other abuse:** \_\_\_\_\_  
\_\_\_\_\_.

B. Others present during the abuse \_\_\_\_\_.

C. Did drugs or alcohol play a role in the domestic abuse?  yes  no.

D. Were weapons used during the abuse?  yes  no.  
*If yes, what weapons?* \_\_\_\_\_

E. Has there been prior domestic abuse?  yes  no.

\_\_\_\_\_ **Petitioner's initials**

**4. REQUESTS TO THE COURT**

THE COURT IS REQUESTED TO ENTER AN EMERGENCY ORDER OF PROTECTION AS FOLLOWS: (*check applicable*)

prohibiting respondent from abusing petitioner or any member of petitioner's household;

providing for law enforcement officers to assist  petitioner  respondent in retrieving  petitioner's  respondent's clothing and personal belongings from the residence at \_\_\_\_\_.

granting petitioner temporary custody of the child(ren) listed in this petition.

prohibiting respondent from contact with the child(ren) listed in this petition.

other relief that is necessary to resolve this domestic abuse problem (*list or describe what relief is necessary*): \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ **Petitioner's initials**

**5. INFORMATION ABOUT THE PETITIONER (ME)**

*(If you do not want the respondent to know your address and phone number, do not include it on this form. Tell the court clerk that you need a separate form (Form 4-961B) for your name and address and request that the clerk place your address under seal.)*

A. **I DO NOT WANT RESPONDENT TO KNOW MY ADDRESS NOW OR AFTER THE HEARING FOR THE FINAL ORDER OF PROTECTION. I HAVE COMPLETED FORM 4-961B AND GIVEN IT TO THE COURT CLERK.**

OR

B. My physical address is: \_\_\_\_\_ in the  
 County  Indian Country of \_\_\_\_\_, State  
of New Mexico.

My mailing address is:

\_\_\_\_\_ (*street address*)  
\_\_\_\_\_ (*city and zip*)

My telephone numbers are:

Home                      Work                                      Message  
\_\_\_\_\_                      \_\_\_\_\_                                      \_\_\_\_\_

\_\_\_\_\_ **Petitioner's initials**

**6. LOCATION OF RESPONDENT**

Respondent may be found at:

\_\_\_\_\_ (*address*)  
\_\_\_\_\_ (*city*)  
\_\_\_\_\_ (*state and zip code*)  
\_\_\_\_\_ (*if in Indian Country,*  
*please name tribe or pueblo*).

Respondent's:

\_\_\_\_\_ (year of birth)  
\_\_\_\_\_ (home telephone number)  
\_\_\_\_\_ (work address)  
\_\_\_\_\_ (work telephone number).

B. Is respondent in jail? [ ] yes [ ] no

\_\_\_\_\_ **Petitioner's initials**

### **OATH OF PETITIONER**

I swear or affirm under penalty of perjury that the facts set forth above are true to the best of my information and belief.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of petitioner*

### **OATH OF LAW ENFORCEMENT OFFICER**

I swear or affirm under penalty of perjury that the facts set forth above are true to the best of my information and belief. I understand that it is a criminal offense subject to the penalty of imprisonment if I make a false statement in this petition.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of law enforcement officer*