

INSTRUCTIONS FOR COMPLETING THE PETITION AND AFFIDAVIT FOR DOMESTIC ABUSE PROTECTION ORDER.

NOTE: THE USE OF THE INFORMATION [WORKSHEET](#) FOR THE DOMESTIC ABUSE PROTECTION ORDER WILL ASSIST YOU IN COMPLETING THIS FORM.

HEADING:

- a. Choose the county in the drop down box below the first blank. This is where you are filing this petition and affidavit.
- b. Enter the first, middle and last names of the petitioner (your name).
- c. Enter the first, middle and last names of the additional petitioner(s) or minor children who are to be covered by THIS petition and affidavit.
PLEASE NOTE: Some courts require a separate petition for each person seeking protection. Check with the court in which you will be filing the request.
- d. Enter the first, middle and last names of the respondent (the other party's name).
- a. The case number will be assigned by the clerk of the district court.

The diagram shows the heading section of the form with callouts a through e. Callout 'a' points to the text 'IN THE DISTRICT COURT OF _____ COUNTY, NEBRASKA' and a dropdown menu labeled 'Choose the county'. Callout 'b' points to the 'Petitioner,' field. Callout 'c' points to the 'Additional Petitioner/Minor Child(ren),' fields. Callout 'd' points to the 'vs.' and 'Respondent,' fields. Callout 'e' points to the 'Case No.' field. The title of the form is 'PETITION AND AFFIDAVIT TO OBTAIN DOMESTIC ABUSE PROTECTION ORDER'.

BODY OF PETITION AND AFFIDAVIT:

The numbers below give instructions for completing the paragraphs with the same numbers in the Petition and Affidavit.

Paragraph 1. a. Enter your full name in the first paragraph.

- b. Check the box that represents your role in this case.
 - i. If you check the first box, the request is for protection just for yourself.
 - ii. If you check the second box you are asking for protection for you AND the “additional petitioners/minor children” who are listed in the heading and are also afraid of domestic abuse.
 - iii. If you check the third box, the protection requested is only for “additional petitioners/minor children” listed in the heading, BUT not for yourself.
 - iv. ONLY If you check either the second or the third box, you will also check the box that represents your relationship to the additional petitioner(s) and/or minor child(ren).

The diagram shows the body of the petition form with callouts a through iv. Callout 'a' points to the first sentence: 'I, _____, am petitioning for a domestic abuse protection order pursuant to Neb. Rev. Stat. § 42-924. I am filing this petition on behalf of: (please check one)'. Callout 'b' points to the three checkboxes for the petitioner's role. Callout 'iv' points to the two checkboxes for the relationship to additional petitioners/children.

- c. Check the box that is correct for if you are 19 or older or legally emancipated or if you are a minor.
 - i. IF YOU ARE A MINOR – enter your age in the box provided.
- d. Check the next box if you do NOT speak English.
 - i. If you check the box, enter the language that you speak.

AND:

I am 19 or older or legally emancipated OR

I am a minor and _____ years of age.

I do not speak English. The language that I speak is: _____

- Paragraph 2. e. Check the box for either: you have received address protection, you are living at a safe house, or that you are providing your address.
- i. If you check the third option, enter your street address in the space provided.
 - ii. If your mailing address is different from your street address enter what your mailing address is.

2. Check Only One:

I have received address protection from the Secretary of State under the Address Confidentiality Program. (Service of any court process shall be made by mailing two copies of the process to the Office of Secretary of State, Address Confidentiality Program, Suite 2300, State Capitol Building, Lincoln, NE, 68509)

I am living at a safe house or shelter for my own protection. Pursuant to Neb. Rev. Stat. § 29-4303, I cannot identify the name, address, location or phone number of the facility.

My address is _____

(Street or Route/Box) (City) (State) (ZIP code)

Mailing address (if different) _____

(Street or Route/Box) (City) (State) (ZIP code)

- Paragraph 3. f. Check the correct box of Paragraph 3.
- i. If you check the box that you do not have the ability to receive emails, you must write an explanation.
 - ii. If you check the box that you can receive emails, enter the email address.

3. Neb. Ct. Rule § 2-208 requires people involved in a case who are not attorneys to provide their email address or provide a reason why they cannot receive emails.

I do not have the ability to receive emails. The reason I cannot receive email is: _____

My email address is: _____

NOTE: By providing this email address, I acknowledge that I am aware that this information will be public record. I also understand that I will only receive email communications regarding this case from the court.

- Paragraph 4. Check the box that coincides with what your relationship to the respondent is.

4. My relationship to the respondent is: (Check the ONE that best applies):

spouse (husband or wife) someone I am presently dating

former spouse someone I have dated in the past

child someone related to me in the

someone I am living with

- Paragraph 5
- g. Enter the age of the respondent.
 - h. Enter the respondent's street address.
 - i. If the respondent's mailing address is different from their street address, enter the mailing address.
 - i. Enter the respondents telephone number.
 - j. Check the next box if the respondent does NOT speak English.
 - i. If you check the box, enter the language that they speak.

5. I am filing this petition against the respondent whose age is: and who resides at:

(Street or Route/Box) (City) (State) (ZIP code)

Mailing address (if different)

(Street or Route/Box) (City) (State) (ZIP code)

(Phone number)

The respondent does not speak English. The language that the respondent speaks is: .

- Paragraph 6
- Enter the identifying characteristics of the respondent in the boxes to the right of the items listed. NOTE: "Other distinguishing features" are those physical traits that would help Law Enforcement recognize the respondent.

6. The following are identifying characteristics for the respondent :

Sex: Race: Skin Tone:

Height: Weight: Eye Color:

Hair Color:

Driver's License #: State:

Exp. Date:

Place of Birth:

- Paragraph 7. I. Check the appropriate box.
- i. IF you AND the respondent HAVE been involved in a past or current court case together, enter the name of the court, the case number, the type of case and the date of the determination.

7. The respondent and I have or have not been involved in past or current court cases together. (i.e., divorce, paternity, custody, juvenile, criminal, or protection orders) If so: when, where, type of case, name of court(s), and case number(s).

- Paragraph 8.
- a. In the first section enter the name, age and residence of the minor child(ren) that you and the respondent have together.
 - b. In the second section enter the name(s) of the child(ren) that you are the parent of, but that the respondent is NOT the parent of.

8. The respondent and I are parents of the following minor child(ren).

a. Name: Age: Residence:

b. I am the parent, but the respondent is not the parent, of the following minor child(ren):

Name: Age: Residence:

Paragraph 9. a. Check all the boxes that apply for the types of protection you are requesting.

NOTE:

- i. If you are requesting that the respondent be removed or kept from your residence, enter the street address in the space provided.
- ii. If you are requesting that the respondent stay away from certain locations, enter the address, location description and the connection you have to the place.
- iii. If you are requesting that the court grant you temporary custody of the minor children, enter how many days (no more than 90 days), the children(s) names, ages and residences.
- iv. If you are asking for sole possession of the household pets, enter the name, species and description.
- v. If you are requesting any additional items to provide for the safety of you and your family or household members, describe what it is and why.

9. I hereby ask the court to enter a protection order (mark all that apply):

- prohibiting the respondent from imposing any restraint upon me or upon my liberty;
- prohibiting the respondent from threatening, assaulting, molesting, or attacking me, or otherwise disturbing my peace;
- prohibiting the respondent from telephoning, contacting, or otherwise communicating with me;
- removing and excluding the respondent from my residence; _____

i.

ordering the respondent to stay away from the following location(s):
(specify address, location description, and connection of place to petitioner)

ii.

- granting me temporary custody of the following minor children for _____ days (not to exceed 90 days):

iii.

Name: _____ Age: _____

Residence: _____

Name: _____ Age: _____

Residence: _____

- granting me sole possession of any household pet(s) owned, possessed, leased, kept, or held by the petitioner, the respondent, or any family or household member residing in the household of the petitioner or respondent. The pet(s) I am requesting sole possession of are:

iv.

Name	Species	Description
_____	_____	_____
_____	_____	_____
_____	_____	_____

Such sole possession shall last for the duration of the protection order or

v.

- ordering any other relief deemed necessary to provide for the safety and welfare of me and any designated family or household member, (describe relief requested and why):

Paragraph 10. Check the appropriate box.

10.

10. I request to have a District Court Judge, or a County Court Judge
preside over this proceeding. (I understand this request may not be granted.)

Paragraph 11. Write a brief, but detailed description of the MOST RECENT and the MOST SEVERE incident(s) of domestic abuse by the respondent. Examples might include shoves, kicks or blows inflicted, weapons used, threats made, injuries sustained and medical or hospital treatment necessary.

For purposes of the Protection from Domestic Abuse Act, abuse means the occurrence of one or more of the following acts: (a) attempting to cause or intentionally and knowingly causing bodily injury; (b) placing, by means of credible threat, another person in fear of bodily injury (either verbally or in writing), or; (c) engaging in sexual contact or sexual penetration without consent.

11.

treatment necessary).

A. Date/Time: _____ Description: _____

Paragraph 13. Enter the information for EACH of the additional petitioner(s)/minor child(ren).

This information includes:

- i. Their full name;
- ii. Their age;
- iii. Their relationship to the respondent (this a drop down list if this form is being completed on line);
- iv. Check box if their address is the same as your address; or
- v. Check box and available space if their address is different from your address.

Petitioner 2 (Minor Child):

i. Name: _____ Age: _____ ii.

iii. Relationship to the Respondent (From list on number 4): _____

iv. Residence: _____

iv. The address of this Petitioner is the same as my address above.

v. This Petitioner's address is: _____

(Street or Route/Box) (City) (State) (ZIP code)

SIGNATURE BLOCK:

DO NOT SIGN THIS COMPLAINT UNTIL YOU ARE PRESENT IN FRONT OF A NOTARY OR THE CLERK OF THE DISTRICT COURT.

NOTARY VERIFICATION STATEMENT:

THIS WILL BE COMPLETED BY THE CLERK OF THE DISTRICT COURT OR BY A NOTARY