

THE FOLLOWING INFORMATION IS REQUIRED BEFORE ELDER PROTECTION ORDER CAN BE ENTERED ON THE DOMESTIC VIOLENCE ORDER REGISTRY

LAW ENFORCEMENT INFORMATION

AGENCY CONTACTED: _____

Law Enforcement Officer's Name: _____

Was a written complaint or incident report filed with law enforcement: YES _____ NO _____

VICTIM'S INFORMATION

Name: _____

Address: _____

Date of Birth: _____ Phone: _____

Social Security No.: XXXX-XX-_____ Sex: _____ Race: _____

Place of Employment: _____

Employer's Address: _____

Relationship with Defendant: _____

PLAINTIFF FILING ON BEHALF OF VICTIM

Name: _____

Address: _____

Phone No.: _____ RELATIONSHIP TO VICTIM: _____

DEFENDANT'S INFORMATION

Name: _____

Address: _____

Phone No.: _____ Date of Birth: _____ Sex: _____

Race: _____ Hair: _____ Eyes: _____

Height: _____ Weight: _____ Identifying Marks (Tattoos, Scars, etc.): _____

Driver's License No.: _____ State: _____ Expiration Date: _____

Vehicle: _____ Tag No.: _____

Place of Employment: _____

Employer's Address: _____

Employer's Phone No.: _____

******THE CLERK'S OFFICE IS FORBIDDEN BY LAW FROM GIVING ANY KIND OF LEGAL ADVICE OR PROVIDING ASSISTANCE IN COMPLETING THE FORMS******

ELDER PETITION FOR PROTECTION FROM ABUSE CHECKLIST:

1. You **MUST** be at least **60 years of age** or older

2. You **MUST** be able to provide the court with a **correct physical address** for the Defendant.

3. The Defendant **MUST** have done one or more of the following (**Check one or more**):
 - Cause you bodily injury
 - Attempted to cause you bodily injury
 - Threatened to cause you bodily injury
 - Placed you in fear of serious bodily injury
 - Caused you to engage in sexual relations by force or threat of force
 - Stole from you
 - Took away or deprived you of food, clothing, or shelter
 - Inflicted emotional or mental anguish on you
 - Trespassed on your property
 - Prevented you from receiving mental or physical health care
 - Used force to exert control over you
 - Abused a physically or mentally incapacitated person

.....

I have read and understand the requirements for filing a Petition for Protection from Abuse. I feel that I meet the requirements and that I qualify for a Protection Order. I request the paperwork to complete.

Signature

Date

PETITIONER'S AFFIDAVIT OF UNDERSTANDING

must be read, sworn, initialed and signed when filing a Petition of Protection from Abuse.

_____ I understand that filing for and obtaining an ELDER ABUSE PROTECTION ORDER in Alabama (Ala Code S38-9-1 thru 11) is a very serious matter under Alabama law.

_____ I understand that the purpose of this act is to assure protection to victims of domestic violence, to prevent domestic abuse and to recognize that battering or assault is a crime.

_____ I agree as a condition to the court considering my petition that I will appear at all hearings set in this case and all criminal proceedings relating to this case.

_____ I agree that I will not file any false petitions nor make any false allegations and that I will testify truthfully at any proceeding relating hereto and fully cooperate with the District Attorney / Prosecutor.

My address is: _____

My phone # is: _____

_____ I understand that violation of a protection order is a crime in Alabama which may carry a sentence of up to one (1) year in the county jail and up to a \$2000 fine.

_____ I agree to immediately report any violation of my protection order, if issued.

_____ I understand that if I sign a petition and obtain an order that I may NOT have any contact with the Defendant unless specifically allowed by the court nor will I do anything to cause or encourage the Defendant to violate the order.

_____ Petitioner agrees to appear for future court date(s).

Petitioner

Date

**ELECTION TO RECEIVE COURT NOTICES
BY E-MAIL OR TEXT IN LIEU OF FIRST-
CLASS MAIL**

In the District/Circuit Court of GENEVA County, Alabama

CASE NUMBERS: _____

I, _____, a party to the above listed case hereby elect to receive court notices in this matter by e-mail and/or text. I understand that by choosing notice by e-mail/text, I will not receive notice through the postal service.

I understand to cancel this election to receive notice by e-mail/text, I must do so in writing to the Circuit Clerk.

I recognize my election to receive notice by e-mail/text or to cancel that election does not affect the service due my attorney through the court's electronic filing system, or to myself if I am a registered user of the electronic filing system.

I understand that it is my responsibility to immediately notify the clerk's office should my e-mail address, phone number, or other contact information change, or if there are any other problems that would prevent receiving notice from the court.

By agreeing to receive text messages about my case, I understand that **STANDARD FEES AND TEXT MESSAGING RATES MAY APPLY BASED ON MY PLAN WITH MY MOBILE DEVICE CARRIER.** I understand that I am responsible for any such fees. I understand that the court cannot guarantee text message delivery. Text messages are merely a courtesy, and it is my responsibility to monitor my registered email address regularly for all notices.

SIGNED: _____ DATE: _____

PRINTED NAME: _____

PRINTED E-MAIL ADDRESS: (Required. Please Print Legibly)

_____ @ _____ CELL

PHONE NUMBER: _____

CELL PHONE CARRIER: _____

PETITION FOR ELDER ABUSE PROTECTION ORDER

Court Case Number

IN THE CIRCUIT COURT OF GENEVA COUNTY, ALABAMA
(Name of County)

_____ v. _____
[Name of Plaintiff (victim)] *[Name of Defendant (person to be restrained)]*

(Name of Plaintiff filing on behalf of victim) *(Name of Victim)* *[Defendant's Address (Business or Home)]*

(Defendant's Social Security Number) *(City)* *(State)* *(Zip Code)*

(Defendant's Date of Birth)

YOU MUST PROVIDE COMPLETE AND TRUTHFUL INFORMATION. IF YOU DO NOT, THE COURT MAY DISMISS THIS CASE, AND YOU MAY BE SUBJECT TO BEING CHARGED WITH PERJURY FOR KNOWINGLY PROVIDING FALSE INFORMATION.

I. ELIGIBLE PLAINTIFFS:

(Note: The word, "Plaintiff," as used in this form, describes the victim and/or the person filing on behalf of the victim):

I am 60 years of age or older and am in need of protection from elder abuse.

OR

I am filing on behalf of a person 60 years of age or older, who is need of protection from elder abuse and lacks the physical or mental capacity to seek protection for himself or herself, and I am the person's (check all that apply): court appointed guardian (include copy of the court order of appointment); court appointed conservator (include copy of the court order of appointment); court appointed temporary guardian (include copy of the court order of appointment); agent, co-agent, or successor agent appointed under the plaintiff's validly executed power of attorney who acts within the authority of the power of attorney (include copy of the power of attorney); health care proxy appointed under the plaintiff's validly executed Advance Directive for Health Care or similar document (include document); an interested person who has the authority to petition for protective placement or other protective services under Section 38-9-6, Ala. Code 1975.

I state that the following is true and correct:

The Plaintiff is a resident of _____ County/Parish in the State of _____.
(Name of County/Parish) *(Name of State)*

Are there any criminal charges against the Defendant because of abuse to the Plaintiff? YES NO
If YES, the charges were brought in _____ County/Parish, _____.
(Name of County/Parish) *(Name of State)*

(Note: If there are more civil or other cases with the Defendant or more criminal charges against the Defendant, please attach additional 8" x 11" sheets of paper, if necessary, stating the case number(s), County(ies)/Parish(es), and States(s) in which these cases are being handled).

(Check one or more of the following boxes if the statement(s) apply/applies to the Plaintiff):

The Plaintiff left his or her residence to avoid further abuse or threat of abuse, and the Plaintiff is temporarily located in _____ County, Alabama.
(Name of County)

The Defendant lives in _____ County/Parish, _____.
(Name of County/Parish) *(Name of State)*

The elder abuse occurred in _____ County, Alabama.
(Name of County)

I am requesting an elder abuse protection order; a change in a current protection order; an emergency order; a change in an emergency order.

Sections 38-9F-1 to 38-9F-12, Ala. Code 1975

Original - Court Record Copy - Law Enforcement Copy - Plaintiff Copy - Defendant

PETITION FOR ELDER ABUSE PROTECTION ORDER

Court Case Number

II. To Get a Protection Order, the Defendant Must Have Done One or More of the Following (Check all that apply):

- Threatened to confine the Plaintiff
- Made the Plaintiff afraid that the Plaintiff would be seriously injured
- Made the Plaintiff have sex by force or threat of force
- Kidnapped the Plaintiff
- Trespassed on the Plaintiff's property
- Tortured or willfully abused the Plaintiff
- Stole from the Plaintiff
- Recklessly engaged in conduct which risked serious injury to the Plaintiff
- Inflicted emotional or mental anguish on the Plaintiff
- Prevented Plaintiff from receiving mental or physical health care
- Injured the Plaintiff
- Used force to exert control over the Plaintiff's property
- Threatened to injure/hurt the Plaintiff
- Stalked the Plaintiff
- Set fire to the Plaintiff's house
- Restrained the Plaintiff
- Took away or deprived the Plaintiff of food, clothing or shelter
- Other (please specify): _____

III. Explain the Abuse That Has Happened Below (If Applicable) (Begin With the Most Recent Act. You May Add Additional 8" x 11" Sheets of Paper, If Necessary):

Date and place where the elder abuse occurred: _____

Describe how the Defendant hurt or threatened the Plaintiff or how the Plaintiff is in imminent danger of becoming a victim:

Describe how the Defendant stole from the Plaintiff: _____

I genuinely fear the Defendant will cause further abuse because: _____

IV. Legal Information (Check all that apply):

There is a current restraining or protection order against the Defendant:

YES; I don't know; NO. If YES, the County and State where it was issued: _____ County, _____ (State).
(Name of County) (Name of State)

The Defendant has a current restraining or protection order against the Plaintiff:

YES; No. If YES, the County and State where it was issued: _____ County, _____ (State).
(Name of County) (Name of State)

The Plaintiff has a court appointed guardian or conservator:

YES; I don't know; NO. If YES, the County and State where it was issued: _____ County, _____ (State).
(Name of County) (Name of State)

(Note: If there are more current restraining or protection orders against the Defendant or against the Plaintiff, please attach additional 8" x 11" sheets of paper, if necessary, stating the case number(s), County(ies)/Parish(es), and State(s) in which these Orders were issued).

PETITION FOR ELDER ABUSE PROTECTION ORDER

Court Case Number

V. Residence

THE DEFENDANT MAY BE REQUIRED TO MOVE FROM THE PLAINTIFF'S RESIDENCE IF THE RESIDENCE IS IN THE SOLE NAME OF THE PLAINTIFF, IF IT IS JOINTLY OWNED OR RENTED BY THE PLAINTIFF AND THE DEFENDANT.

The place where the Plaintiff lives is: Owned by: the Plaintiff; or the Defendant; or both the Plaintiff and the Defendant.
 Rented by:

VI. Emergency Relief Requested (Please Check the Boxes To Show What is Requested):

The Plaintiff is at risk of imminent potential harm, and I am asking the Court for the following for myself or the person(s) for whom I am applying:

(1) Enjoin the Defendant from threatening to commit or committing acts of elder abuse, as defined in the Elder Abuse Protection Order and Enforcement Act, against the:
 Plaintiff; and/or any designated person, to-wit: _____
(Name of Person)

(2) Restrain and enjoin the Defendant from:
 Harassing; Stalking; Annoying; Telephoning; Contacting*; Communicating with: the Plaintiff; OR
 Threatening or engaging in conduct that would place the following in reasonable fear of bodily injury: the Plaintiff; and/or any designated person, to wit: _____
(Name of Person)

* "Contacting" may include, but is not limited to, communicating with the victim verbally or in any written form, either in person, telephonically, electronically, or in any other manner, either directly or indirectly through a third person.

(3) Order the Defendant to stay away from: the Plaintiff's residence; place of employment; and/or any specified place frequented by the Plaintiff the Defendant has no legitimate reason to frequent, to-wit: _____
(Place)

(4) Remove and exclude the Defendant from the residence of the Plaintiff, regardless of ownership of the residence.

(5) Order possession and use of an: automobile and/or other essential personal effects regardless of ownership; and direct the appropriate law enforcement officer to accompany the Plaintiff to the residence of the Plaintiff or to other specified locations as necessary to protect the Plaintiff from abuse.

(6) Prohibit the Defendant from: transferring; concealing; encumbering; or otherwise disposing of specified property mutually owned or leased by the parties or in which the Plaintiff had an ownership interest within the last 12 months, to-wit: _____
(Please describe property).

(7) Prohibit the Defendant from transferring the funds, benefits, property, resources, belongings, or assets of the Plaintiff to any person other than the Plaintiff.

(8) Restrain the Defendant from exercising control over the funds, benefits, property, resources, belongings, or assets of the Plaintiff.

(9) Require the Defendant to provide an accounting of the disposition of the Plaintiff's income and other resources, and of the Plaintiff's debts and expenses.

(10) Restrain the Defendant from exercising any powers the Defendant has been granted as the Plaintiff's agent under power of attorney.

(11) Require the Defendant to comply with the instructions of the Plaintiff's guardian, conservator, or agent under power of attorney.

(12) Order other relief deemed necessary to provide for the safety and welfare of the: Plaintiff; and/or any designated person as follows: _____
(Describe).

VII. Additional relief requested for final hearing (permanent order):

In addition to the relief requested above in "VI. Emergency Relief Requested," I request the following relief for myself and/or person(s) for whom I am applying:

(13) Require the Defendant to return custody or control of the funds, benefits, property, resources, belongings, or assets to the Plaintiff.

(14) Order restitution.

(15) Prohibit the Defendant from possessing a firearm or other weapon specified by the court, except when the weapon is necessary for employment as a law enforcement officer or military personnel.

(16) Order the Defendant to pay attorney's fees and court costs.

Original - Court Record

Copy - Law Enforcement

Copy - Plaintiff

Copy - Defendant

PETITION FOR ELDER ABUSE PROTECTION ORDER

Court Case Number

(17) Order other relief not requested above (describe):

Before me, the undersigned authority, personally appeared the Plaintiff or person filing on behalf of the Plaintiff, who is known to me or presented an identification card to me and who being duly sworn, deposes and says that he/she has read the foregoing Petition for Elder Abuse Protection Order and that the facts herein are true and correct.

Sworn to and subscribed before this _____ day of _____.

Name of Plaintiff (Please print)

(Signature of Plaintiff)

Person filing on behalf of the Plaintiff (Please print)

(Signature of Person filing on behalf of the Plaintiff)

*Signature of Judicial Officer**

*Business Address and Telephone Number of Judicial Officer**

*If an individual who verifies this form is not a judicial officer but is a notary public, that individual must attach one of the acknowledgment pages (for an individual, an entity, or remotely) and complete and sign it and affix the individual's notary seal.

NOTICE TO DEFENDANT

The Defendant is advised that (1) he or she has the right to counsel at his or her own expense at the final hearing on this Petition but not counsel appointed by the court; and (2) he or she has a right to request a final hearing prior to 10 days of perfection of service of this Petition.

Original-Court Record

Copy-Law Enforcement

Copy-Plaintiff

Copy-Defendant