

Instructions for Petition for Sexual Assault Protection Order

This document will be filed in the court file which is a public record. It must also be personally served on the respondent.

Note: If the petitioner qualifies for a Domestic Violence Protection Order, the petitioner cannot get a Sexual Assault Protection Order. If the petitioner has been sexually assaulted **and** the respondent is:

- | | | |
|---|--|---|
| • spouse or former spouse | • current or former dating relationship | • in-law |
| • parent of a common child | • stepparent or stepchild | • parent or child |
| • current or former cohabitant as intimate partner, including current or former registered domestic partner | • current or former cohabitant as roommate | • blood relation other than parent or child |

then file for a Domestic Violence Protection Order instead.

In the Petition, you will state:

- Who the person is that needs to be protected.
- How that person is a victim of sexual assault and that the person is afraid.
- What type of protection you want the judge to grant. In this document, you can ask the judge to require the person who sexually assaulted you to stay away from you, your home, school, work or other places you request, and to have no further contact with you.

To qualify for this order, you do **Not** have to:

- report the incident to law enforcement.
- go to a hospital or have any injuries related to the sexual assault.

One incident of sexual assault is enough to qualify for an order.

This form can be used to request both immediate temporary protection **And** a full protection order. If you need immediate protection, and the court finds an emergency exists, the court may immediately issue a temporary order that will last until a hearing is held, usually within 14 days. At that hearing, the court will determine if a full Sexual Assault Protection Order should be issued. The full Sexual Assault Protection Order can last up to two years. **The respondent has a right to attend that hearing.**

Please Print Clearly Using Black or Blue Ink!

Caption (Page 1)

Fill in the name of the person to be protected as the "Petitioner."

- If you need protection, write in your name.

- If you are filing for protection on behalf of a minor, vulnerable adult, or other adult who, because of age, disability, health or inaccessibility cannot file the petition (other adult), write in that person's name as the petitioner.

The person you want protection from is the "Respondent." Fill in the respondent's name.

Who Needs Protection (Question 1)

The court must know who needs protection. Check the appropriate box for yourself, a minor, a vulnerable or other adult.

- If you are filing on behalf of a minor or a vulnerable or other adult, you must write in your name and your relationship to that person. The judge will determine if it is appropriate for you to file the petition on behalf of the other person.
- If you are filing on behalf of a minor, you must also write in the minor's age.

Residency (Question 2)

The court needs to know where you live in order to determine if the court can issue a protection order. Check **One** of the boxes to tell the court about where you currently live.

Information About the Respondent (Question 3)

The court needs to know the age of the respondent. Check **One** of the boxes for the respondent's age.

If the respondent is under age 18, the court needs to know the name(s) of the respondent's parent(s) or legal guardian(s). List their name(s) if you know them.

Service Member or Dependent of a Service Member (Question 4)

The court needs to know whether the respondent is a service member or a dependent of a service member. A service member is a member of the U.S. armed forces, the Washington State National Guard or Reserves. If you do not know, check the "unknown" box.

Petitioner's Relationship to Respondent (Question 5)

State the petitioner's relationship to respondent, such as neighbor, classmate, co-worker, or none.

Service Address (Question 4)

Write an address where you agree to accept legal documents. If disclosure of the petitioner's address would risk abuse or harassment of the petitioner or any member of the petitioner's family or household, list an alternative address.

Court Cases (Question 5)

This may not be the first court proceeding involving the petitioner and the respondent. The court will need to know about other cases or other restraining, protection or no-contact orders so the court does not issue an order that might conflict with an order from another court.

If there are other cases or other restraining, protection or no-contact orders involving the petitioner and the respondent, list the case name (the parties' names, such as State v. Jones, Adams v. Smith), the case number (if you know it), and the court (district, municipal, or superior), the county and the state in the columns provided.

Request for Sexual Assault Protection Order (Page 2)

These are the different kinds of protection you may need. To ask the court for the protection, check the box at the beginning of each protection you may need and check the boxes within each paragraph as they apply.

1. The first item asks the court to order the respondent not to contact the petitioner.
2. The second item asks the court to exclude the respondent from petitioner's home, workplace, school or day care. If there is someplace else you want to include, add it to the box called "other." The petitioner has a right to keep his or her residential address confidential (secret). There is space for you to write in a residential address on this petition and on the order, but you do not have to if disclosure of the address would put the petitioner or the petitioner's family at risk of abuse or harassment from the respondent. However, enforcement of the order may be easier if an address is included. If you decide to include an address, please list the complete address including the city.
3. The third item asks the court to prohibit the respondent from knowingly coming within or knowingly remaining within a specified distance (e.g., 100 feet, 2 blocks) of petitioner's home, workplace, school or day care. If there is someplace else you want to include, add it to the box called "other."
4. The fourth item applies if the petitioner and respondent are minors under age 18 and are attending the same school. This item asks the court to restrain the respondent from attending the same school as the petitioner and to order the respondent to transfer to another school.
5. The fifth item, "Other," is where you may list something not mentioned in the above items.

Statement (Page 3)

The statement is to describe to the court why the petitioner needs a protection order.

First read the definition of "nonconsensual," "sexual contact" and "sexual penetration" in the box above the statement. Then, read through the statement before you start writing. There are prompts to help you organize your thoughts.

Describe any nonconsensual sexual conduct or nonconsensual sexual penetration and the approximate date and time. Include any statements or actions of the respondent made at the time of the incident or at any other time that caused the petitioner fear. The more details you can provide, the more helpful it is to the judge.

Example:

It is better to say, "On Saturday, May 5 at 10:00 p.m, Joe held me down with his body weight and forced me to have sex in my living room" rather than "Joe assaulted me."

It is better to say, "Joe forced me to touch his penis by grabbing my hand and forcing me to touch him there" rather than "Joe made me touch him."

It is better to say, "Joe told me if I didn't agree to have sex with him, he would hurt me. He said, 'If you don't want to get hurt, you better keep quiet' " rather than "Joe threatened me."

If the respondent said something that caused the petitioner fear, try to use the respondent's exact words.

If you are asking for a temporary order, include a statement describing your immediate fear in the space provided.

If a minor petitioner wants the court to restrain a minor respondent from attending the same school, describe any continuing physical danger or emotional distress to the petitioner caused by the respondent's attendance at the same school.

If any of the information requested does not apply, write, "does not apply" in that section.

When you are done with your statement, put today's date in the date line and fill in the city where you are completing this form.

- Sign the form above the line for "Signature of Petitioner" if you are filing on your own behalf.
- Sign the form above the line for "Signature of Person Filing on Behalf of Petitioner" if you are filing on behalf of a minor or a vulnerable or other adult.

Law Enforcement Information Sheet (LEIS)

You must complete a Law Enforcement Information Sheet (LEIS), form WPF All Cases 01.0400. This form is confidential and it does not go in the public court file and is not served on the respondent.

- It is used by Law Enforcement to locate and identify the respondent when serving documents.
- It is also used by Law Enforcement when entering the order in the state-wide data base.

Complete as much information as possible, especially, first name, middle initial, last name, and date of birth.

If the respondent has a disability, brain injury, or other impairment, you may know of special assistance that law enforcement could provide when serving the documents. For example:

"Respondent has a brain injury. If respondent is rushed, respondent may freeze up and may not respond quickly, or may become verbally aggressive. Remind respondent to contact a friend."

"Respondent has epilepsy and diabetes and may have seizures when stressed. Respondent doesn't respond well to being rushed and will need time to get meds and supplies."

BAINBRIDGE ISLAND MUNICIPAL COURT Kitsap County, Washington	Mail: PO Box 151, Rollingbay, WA 98061 Location: 10255 NE Valley Rd, Bainbridge Island, WA Phone # 206-842-5641 Fax # 206-842-0316 Email: court@bainbridgewa.gov
--	--

Petitioner (Person to be protected)
vs.

Respondent (Person to be restrained)

No.

**Petition for Sexual Assault
Protection Order
(PTORSXP)**

1. Petitioner is a victim of nonconsensual sexual conduct or nonconsensual sexual penetration committed by the respondent as described in the statement below.

I am filing on behalf of myself and I am 16 years or older.

I am filing on behalf of a minor, age _____ . My relationship to the minor is _____ . My name is _____ .

I am filing on behalf of a vulnerable adult as defined in RCW 74.34.020 or 74.34.021; or other adult who, because of age, disability, health or inaccessibility, cannot file the petition. My relationship to the vulnerable adult or other adult is _____ . My name is _____ .

3. Respondent's age is:
 Under 16 16 or 17 18 or over
 (Complete this if known.) If the respondent is under age 18, the name(s) of the minor's parent(s) or legal guardian(s) is/are:

4. Is respondent a service member, or a dependent of a service member?
 yes no unknown

5. Petitioner's relationship to respondent is:

2. Petitioner lives in this city this county.

6. Petitioner may be served with legal documents at: _____ . (If disclosure of petitioner's address would risk abuse or harassment of the petitioner or the petitioner's family or household members, petitioner must list an alternative address.)

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

Case Name			
Case Number			
Court/County/State			

Petitioner Requests a Sexual Assault Protection Order, following a hearing, that will grant the relief requested below:

1. **Restrain** respondent from having any contact with petitioner, including but not limited to telephone calls, mail, written notes, email, texting, and social media (such as Facebook, and Twitter), directly, indirectly, or through third parties regardless of whether those third parties know of the order.

2. **Exclude** respondent from the following places:

- Petitioner's residence
- Petitioner's workplace
- Petitioner's school
- Petitioner's day care
- Other:

3. **Prohibit** respondent from knowingly coming within, or knowingly remaining within _____ (distance) of:

- Petitioner's residence
- Petitioner's workplace
- Petitioner's school
- Petitioner's day care
- Other:

4. **Other:**

5. **Restrain** respondent from attending _____ school at _____ (address) attended by the petitioner and **order** respondent to transfer to a different school. (If this relief is granted, respondent or respondent's parents or legal guardians will be responsible for transportation and all other costs associated with change of school.)

6. **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.

Emergency temporary protection (up to 14 days) until the court hearing:

- An emergency exists as described below. I request that a **Temporary Sexual Assault Protection Order** granting the relief requested above in 1) through 4) be issued immediately, without prior notice to the respondent, to be effective until the hearing.
- I also request a 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?

A Sexual Assault Protection Order is available to protect a victim of nonconsensual sexual conduct or nonconsensual sexual penetration, including a single incident of nonconsensual sexual conduct or nonconsensual sexual penetration, from future interactions with the assailant. **Nonconsensual** means a lack of freely given agreement. **Sexual conduct** means any of the following: (a) any intentional or knowing touching or fondling of the genitals, anus, or breasts, directly or indirectly, including through clothing; (b) any intentional or knowing display of the genitals, anus, or breasts for the purposes of arousal or sexual gratification of the respondent; (c) any intentional or knowing touching or fondling of the genitals, anus, or breasts, directly or indirectly, including through clothing, that the petitioner is forced to perform by another person or the respondent; (d) any forced display of the petitioner's genitals, anus, or breasts for the purposes of arousal or sexual gratification of the respondent or others; (e) any intentional or knowing touching of the clothed or unclothed body of a child under the age of 13, if done for the purpose of sexual gratification or arousal of the respondent or others; and (f) any coerced or forced touching or fondling by a child under the age of thirteen, directly or indirectly, including through clothing, of the genitals, anus, or breasts of the respondent or others. **Sexual Penetration** means any contact, however slight, between the sex organ or anus of one person by an object, the sex organ, mouth or anus of another person, or any intrusion, however slight, of any part of the body of one person or of any animal or object into the sex organ or anus of another person, including but not limited to cunnilingus, fellatio, or anal penetration. Evidence of emission of semen is not required to prove sexual penetration.

Statement: The respondent has committed a single act or acts of nonconsensual sexual conduct or nonconsensual sexual penetration, which give rise to a reasonable fear of future dangerous acts, for which relief is sought.

Describe any nonconsensual sexual conduct or nonconsensual sexual penetration, and the approximate date(s). Include any statements or actions of the respondent at the time of the incident(s) or at any other time that caused the petitioner fear: _____

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

Has the respondent previously committed an offense that makes him or her ineligible to possess a firearm under the provisions of RCW 9.41.040? 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 the petitioner? Please describe:

Other: _____

(Continue on separate page if necessary.)

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

Dated: _____ at _____ Washington.

Signature of Petitioner

Print Name

Signature of Person Filing on Behalf of Petitioner

Print Name

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:	Case Number:
--------	--------------

<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				
Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build
Last Known Address Street: City:					State: Zip:	Phone(s) w/Area Code		Need Interpreter? Yes or No Language:
Employer		Employer's Address			WORK Hours: Phone: ()			
Vehicle License Number	Vehicle Make and Model	Vehicle Color	Vehicle Year	Drivers License or ID number		State		

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								
Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build
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:
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		

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		Minor's Relationship to Restrained Person	
Name: First	Middle	Last	Sex	Race	Birth date	Resides With	Person	Person	Person	Person

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

Confidential Information Form (INFO)

County:	Cause Number:	Do not file in a public access file.
---------	---------------	---

Court Clerk: This is a Restricted Access Document

<input type="checkbox"/> Divorce/Separation/Invalidity/Nonparental Custody/Paternity/Modifications <input type="checkbox"/> Sexual Assault <input type="checkbox"/> Other
<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Antiharassment <input type="checkbox"/> Information Change (Check if you are updating information)
<input type="checkbox"/> A restraining order or protection order is in effect protecting <input type="checkbox"/> the petitioner <input type="checkbox"/> the respondent <input type="checkbox"/> the children.
<input type="checkbox"/> The health, safety, or liberty of a party or child would be jeopardized by disclosure of address information because: _____ _____ _____

The following information about the parties is required in all cases:
 (Use the Addendum To Confidential Information Form to list additional parties or children)

Petitioner Information	Type or Print Only	Respondent Information
Name (Last, First, Middle)		Name (Last, First, Middle)
Race	Sex	Birth date
Driver's Lic. or Identocard (# and State)		Driver's Lic. or Identocard (# and State), (or, if unavailable, residential address)
Mailing Address (P.O. Box/Street, City, State, Zip)		Mailing Address (P.O. Box/Street, City, State, Zip)
Relationship to Child(ren)		Relationship to Child(ren)

The following information is required if there are children involved in the proceeding. (Soc. Sec. No. is not required for petitions in protection order cases (Domestic Violence/Antiharassment/Sexual Assault.)

1) Child's Name (Last, First, Middle)
Child's Race/Sex/Birth date
Child's Soc. Sec. No. (If required)
Child's Present Address or Whereabouts

2) Child's Name (Last, First, Middle)
Child's Race/Sex/Birth date
Child's Soc. Sec. No. (If required)
Child's Present Address or Whereabouts
List the names and present addresses of the persons with whom the child(ren) lived during the last five years:
List the names and present addresses of any person besides you and the respondent who has physical custody of, or claims rights of custody or visitation with, the child(ren):

Except for petitions in protection order cases (Domestic Violence/Antiharassment/ Sexual Assault), the following information is required:	
Petitioner's Information	Respondent's Information
Soc. Sec. No.:	Soc. Sec. No.:
Residential Address (Street, City, State, Zip)	Residential Address (Street, City, State, Zip)
Telephone No.: ()	Telephone No.: ()
Employer:	Employer:
Empl. Address:	Empl. Address:
Empl. Phone No.: ()	Empl. Phone No.: ()
For Nonparental Custody Petitions only, list other Adults in Petitioner(s) household (Name/DOB):	

Additional information: _____

Addendum(s) To Confidential Information Form attached. List other parties or children in Addendum(s).

I certify under penalty of perjury under the laws of the state of Washington that the above information is true and accurate concerning myself and is accurate to the best of my knowledge as to the other party, or is unavailable. The information is unavailable because _____

Signed on _____ [Date] at _____ [City and State].

 Petitioner/Respondent

Addendum To Confidential Information Form (AD)

County:	Cause Number:	Do not file in a public access file.
Court Clerk: This is a Restricted Access Document		

The following information about additional parties is required in all cases.

Additional Petitioner Information	<i>Type or Print only</i>	Additional Respondent information
Name (Last, First, Middle)		Name (Last, First, Middle)
Race	Sex	Birth date
Drivers Lic. or Identocard (# and State)		Drivers Lic. or Identocard (# and State), (or, if unavailable, residential address)
Mailing Address (P.O. Box/Street, City, State, Zip)		Mailing Address (P.O. Box/Street, City, State, Zip)
Relationship to Child(ren)		Relationship to Child(ren)

The following information is required if there are additional children involved in the proceeding (Soc. Sec. No. is not required for petitions in protection order cases (Domestic Violence/Antiharassment/ Sexual Assault.)

3) Child's Name (Last, First, Middle)

Child's Race/Sex/Birth date

Child's Soc. Sec. No. (If required)

Child's Present Address or Whereabouts

4) Child's Name (Last, First, Middle)

Child's Race/Sex/Birth date

Child's Soc. Sec. No. (If required)

Child's Present Address or Whereabouts

Except for petitions in protection order cases (Domestic Violence/Antiharassment/ Sexual Assault), the following information is required:

Additional Petitioner Information	Additional Respondent Information
Soc. Sec. No.:	Soc. Sec. No.:
Residential Address (Street, City, State, Zip)	Residential Address (Street, City, State, Zip)
Telephone No.: ()	Telephone No.: ()
Employer:	Employer:
Empl. Address:	Empl. Address:
Empl. Phone No.: ()	Empl. Phone No.: ()

3. Information about the firearms or other dangerous weapon/s:

What kind of firearm or other dangerous weapon?	Where is it located?

4. My relationship with the restrained person is:
- spouse or former spouse
 - parent of a child in common
 - current or former domestic partner
 - current or former cohabitant as part of a dating relationship

- current or former dating relationship
- stepparent or stepchild
- current or former cohabitant as roommate

- in-law
- parent or child
- blood relation other than parent or child

5. **I request that the court:**

- Prohibit the restrained person from obtaining or possessing a firearm or other dangerous weapon, or a concealed pistol license.
- Require the restrained person to surrender any firearm, other dangerous weapon, and any concealed pistol license issued under RCW 9.41.070.
- Order temporary surrender of a firearm or other dangerous weapon without notice to the restrained person because irreparable injury could result if an order is not issued until the time for response has elapsed.

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

Dated: _____ at (place) _____, Washington.

➤ _____
Signature of Protected Person/Attorney WSBA No.

Print Name