

IN THE TRIBAL COURT OF THE
CONFEDERATED TRIBES OF THE COLVILLE RESERVATION

_____,
Date of Birth: ___/___/___

Petitioner,

vs.

_____,
Date of Birth: ___/___/___

Respondent.

) Case No.:

) PETITION FOR DOMESTIC VIOLENCE
) PROTECTION ORDER

) Civil

) Criminal (Referred by Office of the Prosecutor)

The following is a Petition for a Domestic Violence Protection Order submitted
by _____, the Petitioner. A dangerous situation exists that
the Petitioner feels requires immediate attention from the Court.

Petitioner	Respondent
<input type="checkbox"/> I Am: <input type="checkbox"/> A Member of my Family or Household is: The victim of domestic violence committed by the Respondent as described in the statement below.	Relationship to the Respondent: <input type="checkbox"/> Parent or Child <input type="checkbox"/> Have child in common <input type="checkbox"/> Related by Marriage (In-laws) <input type="checkbox"/> Related by Blood <input type="checkbox"/> Spouse <input type="checkbox"/> Former Spouse <input type="checkbox"/> Currently Dating <input type="checkbox"/> Formerly Dating <input type="checkbox"/> Currently reside together <input type="checkbox"/> Formerly resided together <input type="checkbox"/> Other _____

<input type="checkbox"/> I am a resident of the Colville Confederated Tribes Reservation	<input type="checkbox"/> The Respondent is a resident of the Colville Confederated Tribes Reservation
<input type="checkbox"/> I am an enrolled member of the Colville Tribes; <input type="checkbox"/> I am an enrolled member of the _____ Tribe; <input type="checkbox"/> I am not an enrolled member of any federally recognized Tribe.	<input type="checkbox"/> The Respondent is an enrolled member of the Colville Tribes; <input type="checkbox"/> The Respondent is an enrolled member of the _____ Tribe; <input type="checkbox"/> The Respondent is not an enrolled member of any federally recognized Tribe.
My age or my family member's age is: <input type="checkbox"/> under 16 <input type="checkbox"/> 16 or 17 <input type="checkbox"/> Over 18	Respondent's age is: <input type="checkbox"/> under 16 <input type="checkbox"/> 16 or 17 <input type="checkbox"/> Over 18

9

10 INFORMATION ON THE PETITIONER:

11 Mailing Address: _____ Telephone number: _____

12 Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

13 Vehicle Description: _____ Vehicle License #: _____

14 Place of Employment: _____

15 INFORMATION ON THE RESPONDENT:

16 Mailing Address: _____ Telephone number: _____

17 Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

18 Vehicle Description: _____ Vehicle License #: _____

19 Place of Employment: _____ Previous Criminal Arrests: yes/no

20 Previous Violent Behavior?: _____ Drug or Alcohol Abuse: yes/no

21 Does the Respondent have any access to weapons? List: _____

22 Suicidal?: yes/no

23 MINOR CHILDREN ADDRESSED:

24 There _____ are _____ are no minor children addressed in this petition.

Name	Age/D.O.B.	Relation to: Petitioner	Respondent	Lives with:	Social Security Number:

1 I _____, the requesting party, believe that an emergency
2 situation exists for the reasons given afterwards and am asking the Court to:

3 Grant an immediate emergency protection order without notice to the respondent until a hearing to avoid
4 irreparable injury. I request an order that will:



5 Grant a protection order after a hearing to:



6 Restrain the Respondent from causing any physical harm, bodily injury, assault, sexual
7 assault and from molesting, harassing, threatening or stalking ___Petitioner, ___the minors
8 named in this order, subject to any court ordered visitation, and/or ___any other family or
9 household member.

10 Restrain the Respondent from entering Petitioner's shared residence at:
11 _____ or ___Confidential
12 _____.

13 Restrain the Respondent from entering or being within _____ (distance)
14 of Petitioner's ___Residence, ___Place of Employment, ___School, ___Daycare or school
15 of minors named in this order or ___Other _____.

16 The Respondent is directed to vacate their shared residence at: _____
17 _____ and restore it to the Petitioner.

18 The Respondent is restrained from contacting the Petitioner ___by telephone, ___by mail,
19 ___in person, ___electronically, ___in any manner.

20 The Respondent is restrained from removing the above mentioned children from the
21 Petitioner's custody.

22 The custody of the above mentioned children is removed from the Respondent and
23 transferred to the Petitioner.

24 Respondent is restrained from disturbing Petitioner's possession of the vehicle(s) described
25 as:

Petitioner is granted possession of the following essential personal effects, including the
following:

Petitioner is granted temporary child support of \$ _____ per month.

Petitioner is granted temporary maintenance of \$ _____ per month.

Respondent shall immediately relinquish custody to the Colville Tribal Police Department
of the following weapons:

Other Relief:

I am making the above-mentioned requests based upon the following affidavit, that the Respondent has committed the following acts of domestic violence (describe in detail, including the specific acts, the location whether or not each act was within the boundaries of the Colville Confederated Tribes Reservation, approximate dates. Please include and attach any police responses to these incident(s):

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1 I certify under penalty of perjury under the Laws of the Colville Confederated Tribes that
2 the foregoing is true and correct to the best of my knowledge.

3 Dated this _____ day of _____, 20__.

4
5 _____
6 Signature of Petitioner
7

8
9 Under the Full Faith and Credit section of the Violence Against Women Act (VAWA),
10 18 U.S.C. §2265, a domestic violence protection order must be honored by all States, US
11 territories, and Indian Tribes and enforced as if it were an order of that enforcing State or Indian
12 tribe without regard to whether prior registration or filing has been accomplished.

13
14 SUBSCRIBED AND SWORN TO BEFORE ME
15 This _____ day of _____, 20__
16 In and for the State of Washington residing at _____
17 _____ Term
18 expires: _____

19 _____
20 Notary Public
21

22 I hereby certify that I served a copy of this Order on:

23 _____
24 _____
25 _____

IM – Interoffice Mail; PS – Personal Service; R – Regular Mail;
C – Certified Mail; RLKA – Regular Last Known Address
Clerk's Initial and Date: _____

DO NOT SERVE OR SHOW THIS FORM TO THE RESTRAINED PERSON

Case No: _____

CONFIDENTIAL

FOREIGN PROTECTION ORDER INFORMATION

Fill in as much of the following information as possible. Type or print only.

PERSON BEING RESTRAINED

Interpreter needed in _____ language.

Name (Last, First, Middle)		Nickname	Alias	Race	Ethnicity
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Sex	Height	Weight	Eye Color	Hair Color	Skin Tone	Build/Physical Description
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Birthdate	Social Security Number	Dr. License or Identocard (# and State)
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Current Street Address (City, State, Zip Code)	Home Phone Number
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Vehicle License No.	Vehicle Make and Model	Vehicle Color	Vehicle Year
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PERSONS BEING PROTECTED

Relation to Person Being Restrained:

Name (Last, First, Middle)	Driver's License or Identocard, (# and state)	Birthdate	Race	Sex
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CHILDREN AND HOUSEHOLD MEMBERS

Name (First, Middle Initial, Last)	Birthdate	Age	Race	Sex	Dr. Lic., or Identocard (# and State)	How Related to Persons Protected	Restrained	Resides with

HISTORY/HAZARD INFORMATION

HISTORY Mental Health Problems Assault Assault w/Weapons Alcohol/Drug Abuse

WEAPONS Guns/Rifles Knives Explosives Other

Describe in detail:

Location of Weapons:
 Vehicle
 On Person
 Residence

FOREIGN PROTECTION ORDER INFORMATION

Originating court (name, address, telephone number):	Originating court cause number:
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Date Order was entered:	Expiration date:	Respondent served by: <input type="checkbox"/> personal service <input type="checkbox"/> certified mail <input type="checkbox"/> Respondent attended hearing <input type="checkbox"/> other _____
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Other legal proceeding between same individual (type, cause number and location of court): _____

RELIEF GRANTED (Restrained person is prohibited from)

Information regarding relief granted, citations and violations that are arrestable offenses is in the attached order.

DO NOT SERVE OR SHOW THIS SHEET TO THE PERSON RESTRAINED/RESPONDENT. COURT CLERKS: GIVE THIS FORM TO LAW ENFORCEMENT. DO NOT FILE IN THE COURT FILE.

WARNINGS TO THE RESPONDENT: Violation of the provisions of this order with actual notice of its terms is a criminal offense under chapter 26.50 RCW and will subject a violator to arrest. If the violation of the protection order involves travel across a state line or the boundary of a tribal jurisdiction, or involves conduct within the special maritime and territorial jurisdiction of the United States, which includes tribal lands, the defendant may be subject to criminal prosecution in federal court under 18 U.S.C. sections 2261, 2261A, or 2262.

Violation of this order is a gross misdemeanor unless one of the following conditions apply: Any assault that is a violation of this order and that does not amount to assault in the first degree or second degree under RCW 9A.36.011 or 9A.36.021 is a class C felony. Any conduct in violation of this order that is reckless and creates a substantial risk of death or serious physical injury to another person is a class C felony. Also, a violation of this order is a class C felony if the respondent has at least 2 previous convictions for violating a protection order issued under Titles 10, 26 or 74 RCW.

If the court issues a final protection order, the respondent may not possess a firearm or ammunition for as long as that final protection order is in effect. 18 U.S.C. section 922(g)(8). A violation of this federal firearms law carries a maximum possible penalty of 10 years in prison and a \$250,000 fine. An exception exists for law enforcement officers and military personnel when carrying department/government-issued firearms. 18 U.S.C. section 925(a)(1). If the respondent is convicted of an offense of domestic violence, the respondent will be forbidden for life from possessing a firearm or ammunition. 18 U.S.C. section 922(g)(9); RCW 9.41.040.

YOU CAN BE ARRESTED EVEN IF THE PERSON OR PERSONS WHO OBTAINED THE ORDER INVITE OR ALLOW YOU TO VIOLATE THE ORDER'S PROHIBITIONS. You have the sole responsibility to avoid or refrain from violating the order's provisions. Only the court can change the order upon written application.

Pursuant to 18 U.S.C. section 2265, a court in any of the 50 states, the District of Columbia, Puerto Rico, any United States territory, and any tribal land within the United States shall accord full faith and credit to the order.

It is further ordered that the clerk of the court shall forward a copy of this order on or before the next judicial day to _____ County Sheriff's Office Police Department WHERE PETITIONER LIVES which shall enter it in a computer-based criminal intelligence system available in this state used by law enforcement to list outstanding warrants.

- The clerk of the court shall also forward a copy of this order on or before the next judicial day to _____ County Sheriff's Office Police Department WHERE RESPONDENT LIVES which shall personally serve the respondent with a copy of this order and shall promptly complete and return to this court proof of service.
- Petitioner has made private arrangements for service of this order.

- The law enforcement agency where petitioner respondent lives shall assist petitioner in obtaining:
- Possession of petitioner's residence personal belongings located at: the shared residence respondent's residence other: _____
- Custody of the above-named minors, including taking physical custody for delivery to petitioner (if applicable).
- Other: _____

This Temporary Order for Protection is effective until the next hearing date shown below the caption on page one.

DATED _____ at _____ a.m./p.m.

JUDGE/COURT COMMISSIONER

Presented by:

COLVILLE CONFEDERATED TRIB'
TRIBAL POLICE
AFFIDAVIT OF SERVICE/ATTEMPTED SERVICE

Petitioner/Plaintiff,
Respondent/Defendant.
No:
AFFIDAVIT OF SERVICE/
ATTEMPTED SERVICE

- 1) I, have been directed to serve the following documents:
Petition for Domestic Violence Protection Order
[] Emergency Protection Order
[] Final Protection Order
[] Order to set Show Cause Hearing:
a. [] Civil [] Criminal

2) To the following individual:
Name:
Physical Address:

- 3) I successfully served him/her as follows:
[] personal service OR
[] by leaving the document(s) with a person believed to be 18 years or older at the following address:

[] I served him/her on the following date and time: OR
[] I made a diligent search for the subject and was not able to locate him/her or to serve.

Table with 2 columns: Date Time Location, Additional Information

Further I declare that I have examined the statements made in this affidavit and certify that the facts contained herein are true and correct to the best of my information.

Dated: Police Officer:
SUBSCRIBED AND SWORN TO before me this day of, 20.

NOTARY PUBLIC in and for the State of Washington
Residing at
My Commission Expires: