

INDIAN RIVER COUNTY SHERIFF'S OFFICE IMPERATIVE INFORMATION SHEET

Case No: _____

General Information: Please answer *each* question with *yes* or *no*.

1. Is the Respondent a spouse or former spouse? []Yes []No
2. Do you and the Respondent have a child in common? []Yes []No
3. Do you and the Respondent currently live together? []Yes []No
 - a. If no, have you and the Respondent previously lived together? []Yes []No
4. Have you and the Respondent had intimate relations? []Yes []No
5. Is the Respondent a sibling or any other relation to you? []Yes []No
 - a. If yes, in what aspect? _____
6. Have you suffered physical violence from the Respondent? []Yes []No
7. Was Law Enforcement called? []Yes []No
 - a. Was a report written? []Yes []No
 - b. If yes, when? _____
8. Was Respondent arrested as a result of the events described in Petition? []Yes []No
 - a. If yes, when was the Respondent arrested? _____
9. Is the Respondent currently in jail? []Yes []No
10. In which county was the Respondent arrested? _____
11. Please list other addresses where the Respondent may be found:

12. Does the Respondent own any weapons? []Yes []No
 - a. If yes, what type? _____
13. Please list a description of the Respondent's vehicle: Tag: _____
Color: _____; Year: _____; Make: _____; Model: _____

Petitioner's Name:	Respondent's Name:
Street Address:	Street Address:
City/State/Zip:	City/State/Zip:
Phone Number:	Phone Number:
DOB: Sex:	DOB: Sex:
Race: Height: Weight:	Race: Height: Weight:
Eye Color: Hair Color:	Eye Color: Hair Color:
Scars or Tattoos:	Scars or Tattoos:
Place of Employment:	Place of Employment: Work Days and Hours:
Employer's Address:	Employer's Address:
Employer's Phone Number:	Employer's Phone Number:
Email Address:	Email Address:

COVER SHEET FOR FAMILY COURT CASES

I. Case Style

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

_____,
Petitioner,

and

_____,
Respondent.

II. Type of Action/Proceeding. Place a check beside the proceeding you are initiating. If you are filing more than one type of proceeding (such as a modification and an enforcement proceeding) against the same party at the same time, then you must complete a separate cover sheet for each action being filed. **If you are reopening a case, choose one of the three options below it.**

- (A) ___ Initial Action/Petition
- (B) ___ Reopening Case
 - 1. ___ Modification/Supplemental Petition
 - 2. ___ Motion for Civil Contempt/Enforcement
 - 3. ___ Other

III. Type of Case. If the case fits more than one type of case, select the most definitive.

- (A) ___ Simplified Dissolution of Marriage
- (B) ___ Dissolution of Marriage
- (C) ___ Domestic Violence
- (D) ___ Dating Violence
- (E) ___ Repeat Violence
- (F) ___ Sexual Violence
- (G) ___ Stalking
- (H) ___ Support IV-D (Department of Revenue, Child Support Enforcement)
- (I) ___ Support Non-IV-D (**not** Department of Revenue, Child Support Enforcement)
- (J) ___ UIFSA IV-D (Department of Revenue, Child Support Enforcement)
- (K) ___ UIFSA Non-IV-D (**not** Department of Revenue, Child Support Enforcement)
- (L) ___ Support for Dependent Adult Children – all matters related to support of a dependent adult child.
- (M) ___ Other Family Court
- (N) ___ Adoption Arising Out Of Chapter 63

- (O) ___ Name Change
- (P) ___ Paternity/Disestablishment of Paternity
- (Q) ___ Juvenile Delinquency
- (R) ___ Petition for Dependency
- (S) ___ Shelter Petition
- (T) ___ Termination of Parental Rights Arising Out Of Chapter 39
- (U) ___ Adoption Arising Out Of Chapter 39
- (V) ___ CINS/FINS
- (W) ___ Petition for Temporary or Concurrent Custody by Extended Family
- (X) ___ Emancipation of a Minor

IV. Rule of General Practice and Judicial Administration 2.545(d) requires that a Notice of Related Cases Form, Family Law Form 12.900(h), be filed with the initial pleading/petition by the filing attorney or self-represented litigant in order to notify the court of related cases. Is Form 12.900(h) being filed with this Cover Sheet for Family Court Cases and initial pleading/petition?

___ No, to the best of my knowledge, no related cases exist.
 ___ Yes, all related cases are listed on Family Law Form 12.900(h).

ATTORNEY OR PARTY SIGNATURE

I CERTIFY that the information I have provided in this cover sheet is accurate to the best of my knowledge and belief.

Signature /s/_____ FL Bar No.: _____
 Attorney or party (Bar number, if attorney)

 (Type or print name) (E-mail Address(es))

 Date

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in all blanks]

This form was prepared for the: {choose only **one**} ___ Petitioner ___ Respondent

This form was completed with the assistance of:

{name of individual} _____

{name of business} _____

{address} _____

{city} _____, {state} _____, {zip code} _____, {telephone number} _____.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Petitioner,

Case No.: _____

Division: _____

and

Respondent.

PETITION FOR INJUNCTION FOR PROTECTION AGAINST REPEAT VIOLENCE

I, {full legal name} _____, declare under penalties of perjury,
that the following statements are true:

SECTION I. PETITIONER

(This section is about you. It must be completed. However, if you fear that disclosing your address to the respondent would put you in danger, you should complete and file a Request for Confidential Filing of Address, Florida Supreme Court Approved Family Law Form 12.980(h), and write "confidential" in the space provided on this form for your address and telephone number.)

1. Petitioner currently lives at the following address: {address, city, state, zip code}

_____.

{Indicate if applicable}

_____**Petitioner seeks an injunction for protection on behalf of a minor child.** Petitioner is the parent or legal guardian of {full legal name} _____, a minor child who is living at home.

2. Petitioner's attorney's name, address, and telephone number is:

_____.

(If you do not have an attorney, write "none.")

SECTION II. RESPONDENT

(This section is about the person you want to be protected from. It must be completed.)

1. Respondent currently lives at the following address: {address, city, state, and zip code}

_____.

Respondent's Driver's License number is: {if known} _____.

2. Petitioner has known Respondent since: {date} _____.

3. Respondent's last known place of employment: _____

Employment address: _____

Working hours: _____

4. Physical description of Respondent:
 Race: _____ Sex: Male ___ Female ___ Date of Birth: _____
 Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____
 Distinguishing marks and/or scars: _____
 Vehicle: (make/model) _____ Color: _____ Tag Number: _____
5. Other names Respondent goes by (aliases or nicknames): _____
6. Respondent's attorney's name, address, and telephone number is:

(If you do not know whether Respondent has an attorney, write "unknown." If Respondent does not have an attorney, write "none.")

SECTION III. CASE HISTORY AND REASON FOR SEEKING PETITION (This section must be completed.)

1. Has Petitioner ever received or tried to get an injunction for protection against domestic violence, repeat violence, dating violence, or sexual violence against Respondent in this or any other court?
 _____ Yes _____ No If yes, what happened in that case? *{include case number, if known}*

2. Has Respondent ever received or tried to get an injunction for protection against domestic violence, repeat violence, dating violence, or sexual violence against Petitioner in this or any other court?
 _____ Yes _____ No If yes, what happened in that case? *{include case number, if known}*

3. Describe any other court case that is either going on now or that happened in the past between Petitioner and Respondent *{include case number, if known}*:

4. Respondent has directed at least two incidents of violence, meaning assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, kidnapping, or false imprisonment, or any criminal offense resulting in physical injury or death against Petitioner or a member of Petitioner's immediate family. One of these two incidents of violence has occurred within 6 months of the date of filing of this petition. The most recent incident (including date and location) is described below.
 On *{date}* _____, at *{location}* _____,
 Respondent

_____ Please indicate here if you are attaching additional pages to continue these facts.

5. Other prior incidents (including dates and location) are described below:

On {date} _____, at {location} _____,

Respondent

_____ Please indicate here if you are attaching additional pages to continue these facts.

6. Petitioner genuinely fears repeat violence by Respondent. Explain:

7. Additional Information

{Choose **all** that apply}

a. _____ Respondent owns, has, and/or is known to have guns or other weapons. Describe weapon(s):

b. _____ This or prior acts of repeat violence have been previously reported to: {person or agency}

SECTION IV. INJUNCTION (This section must be completed.)

1. _____ Petitioner asks the Court to enter a TEMPORARY INJUNCTION for protection against repeat violence that will be in place from now until the scheduled hearing in this matter.

2. _____ Petitioner asks the Court to enter, after a hearing has been held on this petition, a final judgment of injunction prohibiting Respondent from committing any acts of violence against Petitioner **and**:

a. prohibiting Respondent from going to or within 500 feet of any place Petitioner lives;

b. prohibiting Respondent from going to or within 500 feet of Petitioner’s place(s) of employment or the school that Petitioner attends; the address of Petitioner’s place(s) of employment and/or school is: _____;

c. prohibiting Respondent from contacting Petitioner by telephone, mail, by e-mail, in writing, through another person, or in any other manner;

d. ordering Respondent not to use or possess any guns or firearms;

{Indicate **all** that apply}

e. _____ prohibiting Respondent from going to or within 500 feet of the following place(s) Petitioner or Petitioner’s immediate family must go to often: _____

f. _____prohibiting Respondent from knowingly and intentionally going to or within 100 feet of Petitioner’s motor vehicle; and any other terms the Court deems necessary for the safety of Petitioner and Petitioner’s immediate family.

I UNDERSTAND THAT BY FILING THIS PETITION, I AM ASKING THE COURT TO HOLD A HEARING ON THIS PETITION, THAT BOTH THE RESPONDENT AND I WILL BE NOTIFIED OF THE HEARING, AND THAT I MUST APPEAR AT THE HEARING. I UNDERSTAND THAT IF EITHER RESPONDENT OR I FAIL TO APPEAR AT THE FINAL HEARING, WE WILL BE BOUND BY THE TERMS OF ANY INJUNCTION OR ORDER ISSUED AT THAT HEARING.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE. I UNDERSTAND THAT THE STATEMENTS MADE IN THIS PETITION ARE BEING MADE UNDER PENALTIES OF PERJURY, PUNISHABLE AS PROVIDED IN SECTION 92.525, FLORIDA STATUTES.

Dated: _____

/s/ _____

Signature of Petitioner

Printed Name: _____

{Do not write your address if you are filing or have filed a Request for Confidential Filing of Address, Form 12.980(h).}

Address: _____

City, State, Zip: _____

Telephone Number: _____

Designated E-Mail Address(es): _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:

[fill in all blanks] This form was prepared for the: {choose only one} () Petitioner () Respondent

This form was completed with the assistance of:

{name of individual} _____

{name of business or individual} _____

{address} _____

{city} _____, {state} _____, {telephone number} _____.

{email address} _____.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____
Division: _____

Petitioner,
and

Respondent.

NOTICE OF RELATED CASES

1. Petitioner submits this Notice of Related Cases as required by Florida Rule of General Practice and Judicial Administration 2.545(d). A related case may be an open or closed civil, criminal, guardianship, domestic violence, juvenile delinquency, juvenile dependency, or domestic relations case. A case is "related" to this family law case if it involves any of the same parties, children, or issues and it is pending at the time the party files a family case; if it affects the court's jurisdiction to proceed; if an order in the related case may conflict with an order on the same issues in the new case; or if an order in the new case may conflict with an order in the earlier litigation.

[check **one** only]

There are no related cases.

The following are the related cases (add additional pages if necessary):

Related Case No. 1

Case Name(s): _____

Petitioner _____

Respondent _____

Case No.: _____ Division: _____

Type of Proceeding: [check **all** that apply]

<input type="checkbox"/> Dissolution of Marriage	<input type="checkbox"/> Paternity
<input type="checkbox"/> Custody	<input type="checkbox"/> Adoption
<input type="checkbox"/> Child Support	<input type="checkbox"/> Support for Dependent Adult Children
<input type="checkbox"/> Modification/Enforcement/Contempt Proceedings	
<input type="checkbox"/> Juvenile Dependency	<input type="checkbox"/> Juvenile Delinquency
<input type="checkbox"/> Termination of Parental Rights	<input type="checkbox"/> Criminal
<input type="checkbox"/> Domestic/Sexual/Dating/Repeat	<input type="checkbox"/> Mental Health
<input type="checkbox"/> Violence or Stalking Injunctions	<input type="checkbox"/> Other {specify} _____

State where case was decided or is pending: Florida Other: {specify} _____

Name of Court where case was decided or is pending (for example, Fifth Circuit Court, Marion County, Florida): _____

Title of last Court Order/Judgment (if any): _____
Date of Court Order/Judgment (if any): _____

Relationship of cases check **all** that apply]:

- pending case involves same parties, children, or issues;
- may affect court's jurisdiction;
- order in related case may conflict with an order in this case;
- order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases:

Related Case No. 2

Case Name(s): _____
Petitioner _____
Respondent _____
Case No.: _____ Division: _____

Type of Proceeding: [check **all** that apply]

- | | |
|--|---|
| <input type="checkbox"/> Dissolution of Marriage | <input type="checkbox"/> Paternity |
| <input type="checkbox"/> Custody | <input type="checkbox"/> Adoption |
| <input type="checkbox"/> Child Support | <input type="checkbox"/> Support for Dependent Adult Children |
| <input type="checkbox"/> Modification/Enforcement/Contempt Proceedings | |
| <input type="checkbox"/> Juvenile Dependency | <input type="checkbox"/> Juvenile Delinquency |
| <input type="checkbox"/> Termination of Parental Rights | <input type="checkbox"/> Criminal |
| <input type="checkbox"/> Domestic/Sexual/Dating/Repeat | <input type="checkbox"/> Mental Health |
| <input type="checkbox"/> Violence or Stalking Injunctions | <input type="checkbox"/> Other {specify} _____ |

State where case was decided or is pending: Florida Other: {specify} _____

Name of Court where case was decided or is pending (for example, Fifth Circuit Court, Marion County, Florida): _____

Title of last Court Order/Judgment (if any): _____
Date of Court Order/Judgment (if any): _____

Relationship of cases check all that apply]:

- pending case involves same parties, children, or issues.
- may affect court's jurisdiction;
- order in related case may conflict with an order in this case;
- order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases:

Related Case No. 3

Case Name(s): _____

Petitioner _____

Respondent _____

Case No.: _____ Division: _____

Type of Proceeding: [check **all** that apply]

- Dissolution of Marriage
- Custody
- Child Support
- Modification/Enforcement/Contempt Proceedings
- Juvenile Dependency
- Termination of Parental Rights
- Domestic/Sexual/Dating/Repeat
- Violence or Stalking Injunctions
- Paternity
- Adoption
- Support for Dependent Adult Children
- Juvenile Delinquency
- Criminal
- Mental Health
- Other {specify} _____

State where case was decided or is pending: _____ Florida _____ Other: {specify} _____

Name of Court where case was decided or is pending (for example, Fifth Circuit Court, Marion County, Florida): _____

Title of last Court Order/Judgment (if any): _____

Date of Court Order/Judgment (if any): _____

Relationship of cases check all that apply]:

- pending case involves same parties, children, or issues;
- may affect court's jurisdiction;
- order in related case may conflict with an order in this case;
- order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases:

2. [check **one** only]

- I **do not** request coordination of litigation in any of the cases listed above.
- I **do** request coordination of the following cases:

3. [check **all** that apply]

- Assignment to one judge
- Coordination of existing cases will conserve judicial resources and promote an efficient determination of these case because:

4. The Petitioner acknowledges a continuing duty to inform the court of any cases in this or any other state that could affect the current proceeding.

Dated: _____

/S/ _____
Petitioner's Signature
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____
E-mail Address(es): _____

CERTIFICATE OF SERVICE

I **CERTIFY** that I delivered a copy of this Notice of Related Cases to the _____ County Sheriff's Department or a certified process server for service on the Respondent, and [**check all used**] () e-mailed () mailed () hand delivered, a copy to {name} _____, who is the [**check all that apply**] () judge assigned to new case, () chief judge or family law administrative judge, () {name} _____ a party to the related case, () {name} _____, a party to the related case on {date} _____.

S/S _____
Signature of Petitioner/Attorney for Petitioner
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
E-mail Address(es): _____
Florida Bar Number: _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:

[fill in **all** blanks] This form was prepared for the {choose **only one**}: () Petitioner () Respondent.

This form was completed with the assistance of:

{name of individual} _____,
{name of business} _____,
{address} _____,
{city} _____ {state} _____, {telephone number} _____.

**IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT IN
AND FOR INDIAN RIVER COUNTY, FLORIDA**

Case No: _____

Petitioner

Vs.

Respondent

**DECLINATION OF FINAL HEARING BY PETITIONER WHEN TEMPORARY INJUNCTION FOR
PROTECTION AGAINST VIOLENCE HAS BEEN DENIED AND REQUEST FOR DISMISSAL OF
PETITION FOR INJUNCTION**

1. I, the undersigned Petitioner, understand that if the Judge does not issue a Temporary Injunction, I might be entitled to a Hearing before a Judge on my Petition for Protection against Domestic, Repeat, Dating, or Sexual Violence or on my Petition for Protection against Stalking.
2. I am fully aware that the Judge may deny my Petition but determine that a Hearing should be held based upon the facts I have written in my Petition. I request that the Judge dismiss my Petition and not schedule a Hearing even if the Judge decides a Hearing should be held and know I am giving up my opportunity to further explain in court why I am in need of an Injunction For Protection Against Violence.

(CHECK ONE)

_____ I do believe it is in my best interest to have a hearing and want to go forward with a Hearing.

_____ I do not believe it is in my best interest to have a Hearing. Therefore, I hereby give up my right to a Hearing and request that the case be dismissed so no service of the Petition is made upon the Respondent.

3. I understand that I am always entitled to re-file for a Petition for Protection against Domestic, Repeat, Dating, or Sexual Violence or a Petition for Protection against Stalking in the future.

Petitioner: /s/ _____

Date _____

Sworn to (or affirmed) and subscribed before me by means of _____ physical presence or _____ online
Notarization, this _____ day of _____, 20_____.

/s/ _____
Signature of Notary Public/Deputy Clerk

Name of Notary / Clerk (typed, printed or stamped)

Produced identification _____

Type of identification produced _____