

COURT OF COMMON PLEAS
DIVISION OF DOMESTIC RELATIONS
HAMILTON COUNTY, OHIO

For Court Use Only	
Prior Filing Yes	No
E / Z #	
Case # DR	Active: Y / N
Judge	Mag
Case # DV	
Judge	Mag
XPAR	FULL
CAGR	DISM
Order Effective Until	

Petitioner :

Address :

City, State, Zip Code :

Date Of Birth: :

v. :

Respondent :

Address :

City, State, Zip Code :

Date Of Birth: :

Case No. _____

Judge _____

**PETITION FOR DOMESTIC VIOLENCE
CIVIL PROTECTION ORDER (R.C. 3113.31)**

Notice to Petitioner: Throughout this form, check every that applies.

Do NOT write your address at left or below if you are requesting confidentiality. Please provide an address where you can receive notices from the Court. This form is public record.

1. Petitioner is a victim of domestic violence and seeks relief on Petitioner's own behalf. The relationship of Petitioner to Respondent is that of:

- Spouse of Respondent
- Former spouse of Respondent
- The natural parent of Respondent's child
- Other relative (by blood or marriage) of Respondent/ Petitioner who has lived with Respondent at any time
- Dating relationship of a romantic or intimate nature within the past 12 months

- Child of Respondent
- Parent of Respondent
- Foster Parent
- Person "living as a spouse of Respondent" defined as:
 - now cohabiting;
 - or cohabited within five years prior to the alleged act of domestic violence

2. Petitioner seeks relief on behalf of the following family or household members:

NAME	DATE OF BIRTH	HOW RELATED TO		RESIDES WITH
		PETITIONER	RESPONDENT	

- (g) Requires Respondent to complete batterer counseling, substance abuse counseling, or other counseling as determined necessary by the Court.
- (h) Requires Respondent to refrain from entering, approaching, or contacting (by any means) the residence, school, business, and place of employment of or approaching or contacting (by any means) Petitioner and the family or household members named in this Petition.
- (i) Requires Respondent to permit Petitioner or other family or household member to have exclusive use of the following motor vehicle: _____
- (j) Includes the following additional provisions: _____

- 5. Petitioner further requests that the Court issue an *ex parte* (emergency) protection order under Ohio Revised Code 3113.31(D) and (E) and this Petition.
- 6. Petitioner further requests that the Court issue no mutual protection orders or other orders against Petitioner unless all of the conditions of Ohio Revised Code 3113.31 (E) (4) are met.
- 7. Petitioner further requests that if Petitioner has a victim advocate, the Court permit the victim advocate to accompany Petitioner at all stages of these proceedings as required by Ohio Revised Code 3113.31(M).
- 8. Petitioner further requests that the Court grant such other relief as the Court considers equitable and fair.
- 9. Petitioner lists here all present court cases and pertinent past court cases (including civil, criminal, divorce, juvenile, custody, visitation, and bankruptcy cases) that relate to the Respondent, you, your children, your family, or your household members:

CASE NAME	CASE NUMBER	COURT/COUNTY	TYPE OF CASE	RESULT OF CASE

I hereby swear or affirm that the answers above are true, complete and accurate to the best of my knowledge. I understand that falsification of this document may result in a contempt of court finding against me which could result in a jail sentence and fine, and that falsification of this document may also subject me to criminal penalties for perjury under Ohio Revised Code 2921.11.

DO NOT SIGN THIS FORM UNLESS YOU ARE IN FRONT OF THE PERSON WHO WILL NOTARIZE THE PETITION FOR YOU.

Sworn to and subscribed before me on this _____ day
of _____, _____.

SIGNATURE OF PETITIONER

**Do NOT write your address below if you are requesting confidentiality. Please provide an address where you can receive notices from the Court.
This form is public record.**

NOTARY PUBLIC

Petitioner's Safe Address

NOTARY PUBLIC

Sworn to and subscribed before me on this _____ day
of _____, 2020.

Signature of Attorney for Petitioner (if applicable)

Aftab Pureval
Clerk of the Common Pleas of Hamilton County, Ohio

Name of Attorney (if applicable)

By _____
Deputy Clerk

Attorney's Address

City, State, Zip Code

Attorney's Registration Number

Attorney's Phone Number

Attorney's Fax

Attorney Email