

RENEWING A RESTRAINING ORDER

UNDER THE FAMILY ABUSE PREVENTION ACT (FAPA)

IMPORTANT NOTE: PROCEDURES FOR RENEWING RESTRAINING ORDERS VARY FROM COURT TO COURT. CHECK WITH YOUR LOCAL COURT FOR MORE INFORMATION.



CAN I RENEW A RESTRAINING ORDER?

If you are the petitioner (the person who asked for the order), you can ask the court to renew it for another year if you are afraid you may be abused by the respondent in the future. You do not have to show that new abuse has occurred. You do have to explain why you want the order renewed.

HOW DO I ASK FOR MY RESTRAINING ORDER TO BE RENEWED?

Fill out the renewal forms and submit them to the court where you got your original restraining order.

File your request with the court before the current order ends. Restraining orders last for one year from the day of the judge's signature. To renew the current order, your papers must be filed before the end of that year. You may lose your chance to renew if you do not file before the date the current order ends.

WHAT HAPPENS NEXT?

After you file your renewal forms, the judge will decide if it is reasonable for a person in your situation to be afraid of future abuse by the respondent if the restraining order is not renewed. Ask the court clerk how the court handles renewal requests. If your request is granted, make sure you get enough copies from the court to serve the respondent. The court will provide copies to you at no charge.

Service - You cannot serve the papers yourself. Have one of the copies hand-delivered to the respondent. This can be done by a sheriff, a private process server, or any competent¹ person who is 18 or older, as long as the server lives in the state where the papers are served. The server must complete a *Certificate of Service* and file with the court. There is a form in the packet, but some servers use their own forms. Talk to the court clerk about ways to get the respondent served.

The respondent has 30 days from the date of service to request a hearing. If the respondent does not request a hearing, the renewed restraining order will stay in effect.

If the respondent requests a hearing, it will be held within 21 days after receiving the hearing request. The court will mail you a notice of the hearing date and time or may notify you by phone. It is very important for you to give the court a reliable address and phone number where you can be contacted. If you do not appear at the hearing, your restraining order may be dismissed. **Be sure the court always has your current contact address and contact phone number so you get notice of any hearing.** Use a safe contact address and contact phone number.

¹ "Competent" means that a person who can understand, remember, and tell others about an event

DO I NEED A LAWYER?

If you have questions about how the law works or what it means, you may need to talk to a lawyer. Court staff cannot give you legal advice. You may have a lawyer represent you at the hearing but it is not required. If you need help finding a lawyer, call the Oregon State Bar's Lawyer Referral Service at 503.684.3763 or 800.452.7636. If you believe you cannot afford a lawyer, ask court staff if your area has any legal services (legal aid) programs that might help you.

WHAT IF I NEED AN ACCOMMODATION OR AN INTERPRETER?

If you have a disability and need an accommodation, or if you need a foreign language interpreter, tell the court as soon as possible, at least four days before your hearing. Tell the clerk that you have a disability and what type of assistance you need or prefer, or which language you speak.

COURT FORMS

Forms that can be used in all Oregon courts are available here:

www.courts.oregon.gov/forms

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF _____

Case No: _____

Petitioner

v.

**PETITION TO RENEW
RESTRAINING ORDER**

Respondent
(Person restrained)

(Family Abuse Prevention Act)

➤ I need an interpreter: Spanish Russian other: _____

NOTICE TO PETITIONER

➤ **Contact Address and Telephone Number:** If you don't want the respondent to know your residential address or phone number, use a contact address and phone number so the court and the sheriff can reach you if necessary.

I am the Petitioner. I declare that the following information is true:

I fear further acts of abuse by Respondent if the Restraining Order is not renewed because (*you do not have to show that there have been new acts of abuse since the original Order*):

I ask the court to renew the *Restraining Order* for a period of 1 year, and continue the security amount entered in the original order

The Restraining Order was first signed by the judge on (date): _____

I hereby declare that the above statements are true to the best of my knowledge and belief. I understand they are made for use as evidence in court and I am subject to penalty for perjury.

Submitted by Petitioner Attorney for Petitioner

Date

Petitioner Signature

Name (printed)

Contact Address (use a SAFE address)

City, State, ZIP

Contact Phone (use a SAFE number)

Attorney for Petitioner:

Date

Signature

OSB#

Name (printed)

Address

City, State, ZIP

Phone

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF _____

Case No: _____

Petitioner

v.

**ORDER RE: RENEWING
RESTRAINING ORDER**

Respondent
(Person restrained)

(Family Abuse Prevention Act)

NOTICE TO RESPONDENT

- This Order continues the original (or modified) *Restraining Order* and is effective immediately
- Violation of the *Restraining Order* may result in your arrest, or in civil or criminal penalties
- The *Restraining Order* is enforceable in every state, the District of Columbia, and all tribal lands and territories of the United States
- If you want to oppose the continuation of the order, see the *Notice to Respondent* and *Request for Hearing* forms you received with this order

The court reviewed the *Petition to Renew Restraining Order*

THE COURT FINDS:

A person in Petitioner's situation would reasonably fear further acts of abuse by Respondent if the *Restraining Order* is not renewed

No further service is necessary because Respondent appeared in person before the court

Other: _____

THE COURT ORDERS:

The *Restraining Order* in this case is RENEWED for 1 year, expiring on (date): _____

- Firearms Surrender** - The prior Order was signed before January 1, 2020.
- Respondent is ordered to surrender all firearms and ammunition according to the attached *Firearms Surrender and Return Terms*, which are incorporated and made part of this *Order*. Criminal penalties apply for violation of the firearms prohibition.
 - Respondent is ordered to file a *Declaration of Firearms Surrender* with any required attachments according to the *Firearms Surrender and Return Terms*

The *Petition to Renew Restraining Order* is DENIED because: _____

Other Orders:

SECURITY AMOUNT for violation of any provision of this Order or the original Order is **\$5,000** unless otherwise specified here: \$ _____

**CERTIFICATE OF COMPLIANCE
WITH THE VIOLENCE AGAINST WOMEN ACT**

This protective order meets all full faith and credit requirements of the Violence Against Women Act. (18 U.S.C. 2265) This court has jurisdiction over the parties and the subject matter. The Respondent is being afforded notice and timely opportunity to be heard as provided by the law of the jurisdiction. This order is valid and entitled to enforcement in this and all other jurisdictions.

Judge Signature:

Certificate of Readiness

This proposed Order is ready for judicial signature because it is submitted **ex parte** as allowed by statute or rule; or in **open court** with all parties present

Submitted by Petitioner Attorney for Petitioner

Date

Signature

OSB# (*attorneys only*)

Name (printed)

Contact Address (*use a SAFE address*) City, State, ZIP

Contact Phone (*use a SAFE number*)

FIREARMS PROHIBITIONS APPLY TO YOU

If the firearms prohibition in Paragraph 10 or 11 (Paragraph 20 if issued after January 1, 2020) of the original *Restraining Order to Prevent Abuse* is initiated by the judge and has not been changed, it is unlawful for you to possess or purchase a FIREARM, including a rifle, pistol, or revolver, and AMMUNITION under ORS 107.718(1)(h).

As a result of this order, or any order renewing or changing this order, it may be unlawful for you to possess or purchase a firearm, including, a rifle, pistol, or revolver, or ammunition under federal law (18 U.S.C. § 922(g)(8)). State law also prohibits you from possession or purchase of a firearm (ORS 166.250 to 166.270). This order may affect your ability to serve in the Armed Forces of the United States or to be employed in law enforcement. If you have any questions about how these laws apply to you, talk to a lawyer.

You may be prohibited from:

- Traveling across state lines or tribal land lines with the intent to violate this order and then violating this order
- Causing the Petitioner to cross state lines or tribal land lines for the purpose of violating the order

If this renewal is granted, criminal penalties apply for violation of the firearms prohibition

Other Laws May Also Apply To You

Whether or not a *Restraining Order* is in effect, federal law may prohibit you from:

- Traveling across state lines or tribal land lines with the intent to injure the Petitioner and then intentionally committing a crime of violence causing bodily injury to the Petitioner
- Causing the Petitioner to travel across state lines or tribal land lines if your intent is to cause bodily injury to the Petitioner or if the travel results in your causing bodily injury to the Petitioner

SERVICE INFORMATION

*****The Respondent will receive a copy of this information*****
If you do not want Respondent to know your residential address or phone number, use a contact address in the state where you reside or a contact phone number so the court and the sheriff can reach you if necessary. Check for mail at this address frequently. The court will assume that you receive all notices sent to your contact address.

PETITIONER: (Name) _____ Female Male

Residence/Contact Address (use a safe address): Street, Apartment, City, State, ZIP _____ County _____

Contact Phone Number _____ (Use safe contact number)

Age _____ Race/Ethnicity _____ Height _____ Weight _____

Eye Color _____ Hair Color _____

RESPONDENT: (Name) _____ Female Male

Residence Address _____ County _____

Phone Number _____

Age _____ Race/Ethnicity _____ Height _____ Weight _____

Eye Color _____ Hair Color _____

**PLEASE FILL OUT THIS INFORMATION
TO HELP WITH SERVICE OF THE RESTRAINING ORDER**

Where is Respondent most likely to be found?

- Residence Hours _____ Address above _____
- Employment Hours _____ Address on CIF form _____
- Other: Hours _____ Address _____

Description of Vehicle _____

Is there anything about the other party's character, past behavior, or the present situation that indicates that he or she may be a **danger** to others? To him/herself? (Explain): _____

Does the other party have any **weapons, or access to weapons**? (Explain): _____

Has the other party ever been **arrested for or convicted of** a violent crime? (Explain): _____

NOTICE TO RESPONDENT AND REQUEST FOR HEARING

NOTICE OF EXCEPTIONAL CIRCUMSTANCES HEARING:

The court has scheduled an exceptional circumstances hearing about the temporary custody of your children on:

Date: _____ Time: _____ Courtroom: _____

See below for information about the "Exceptional Circumstances" hearing

THIS FORM MUST BE ATTACHED TO ALL COPIES OF THE *RESTRAINING ORDER*

Case#: _____

TO RESPONDENT: A *RESTRAINING ORDER* HAS BEEN ISSUED BY THE COURT THAT AFFECTS YOUR RIGHTS. THE ORDER IS NOW IN EFFECT.

You have the right to contest the Restraining Order as set out in the paragraph checked below.

An "Exceptional Circumstance" Hearing Has Been Scheduled

(See the box on the top of this page, "Notice of Exceptional Circumstances Hearing")

The court has decided that there are exceptional circumstances affecting your children. The court has ordered a hearing to decide temporary custody. If you want to be heard on the issue of temporary custody or if you oppose the *Order* or any of its terms, you must appear at the date and time in the box above. This will be your **only** chance to oppose the *Order*. If you do not go to the hearing, the *Restraining Order* may remain in effect.

If you want an earlier hearing than the date above, complete the *Request for Hearing* form below and mail or deliver it to the address on Page 2.

An "Exceptional Circumstances" Hearing Has NOT Been Scheduled

(The box on the top of this page is BLANK)

If you oppose the Restraining Order, including any parenting time or custody order, complete the attached "*Request for Hearing*" form. Mail or deliver it to the address on Page 2.

A REQUEST FOR HEARING must be filed with the court **within 30 days** after you received the order. You must include your address and telephone number. At the hearing, a judge will decide whether the order should remain in effect, be changed, or dismissed. **If you do not go to the hearing, the restraining order may remain in effect.**

- The hearing will be held within **5 business days** if you are contesting a custody order (not parenting time), or
- within **21 calendar days** if you do not oppose a custody order

If no Exceptional Circumstances hearing date has been set and you do not request a hearing within 30 days, the restraining order will remain in effect as issued.

Enforceability of the Restraining Order

The *Restraining Order* you have received is in effect and remains in effect until the court changes (modifies) or dismisses it, or until it expires. The order may also be renewed upon a

finding that a person in the Petitioner's situation would reasonably fear further acts of abuse by you if the order is not renewed.

If you are arrested for violating this order, the security amount (bail) is \$5,000, unless a different amount is ordered by the court.

The order is enforceable in every county in Oregon. It is also enforceable in all 50 states, the District of Columbia, tribal lands, and territories of the United States. This includes any order renewing or changing this order.

Violation of the Restraining Order

Violation of any part of this order (or any order renewing or changing this order) is contempt of court. Contempt is punishable by a fine of up to \$500 or 1% of your annual gross income, whichever is greater, or a jail term of up to six months, or both. Other penalties may also be imposed.

FIREARMS PROHIBITIONS MAY APPLY TO YOU!

If the firearms prohibition in Paragraph 11 of the *Restraining Order* is initialed by the judge, it is unlawful for you to possess or purchase a FIREARM, including a rifle, pistol, or revolver, and AMMUNITION under ORS 107.718(1)(h). If applicable, you are subject to contempt of court for violation of the firearms prohibition as soon as you are served with the *Order*. Criminal penalties may also apply, see below.

As a result of this order, or any order renewing or changing this order, it may be unlawful for you to possess or purchase a firearm, including, a rifle, pistol, or revolver, or ammunition under federal, state, and local laws. This order may affect your ability to serve in the Armed Forces of the United States or to be employed in law enforcement. If you have any questions about how these laws apply to you, talk to a lawyer.

Criminal Penalties for Firearms Possession (ORS 166.255(1)(a)(A)(11))

*****See the *Instructions* for more information*****

You will be subject to criminal penalties for possession of firearms or ammunition effective the earlier of:

(1) 30 days after you were served with the *Order* (if you don't request a hearing),

Or, if you do request a hearing:

(2) the date of the hearing if you fail to appear at the hearing or

(3) the date you withdraw your request for a hearing

You may also be prohibited from:

- Traveling across state lines or tribal land lines with the intent to violate this Order and then violating this order
- Causing the Petitioner to cross state lines or tribal land lines for the purpose of violating the order

Other Laws May Also Apply To You

Whether or not a *Restraining Order* is in effect, federal law may prohibit you from:

- Traveling across state lines or tribal land lines with the intent to injure the Petitioner and then intentionally committing a crime of violence causing bodily injury to the Petitioner
- Causing the Petitioner to travel across state lines or tribal land lines if your intent is to cause bodily injury to the Petitioner or if the travel results in you causing bodily injury to the Petitioner

IF YOU COMPLETE THE REQUEST FOR HEARING FORM, MAIL OR DELIVER IT TO (address of court): _____

REQUEST FOR HEARING

(To Be Completed By Respondent Only)

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF _____

Case No: _____

Petitioner

v.

REQUEST FOR HEARING

Respondent

(Person to be restrained)

(Family Abuse Prevention Act)

➤ I need an interpreter: Spanish Russian other: _____

I am the Respondent. I request a hearing to oppose the *Restraining Order* as follows:

Complete section A or B:

A. NO HEARING DATE HAS BEEN SET

I oppose: *(check all that apply)*

the order restraining me from contacting, threatening, or attempting to contact the
Petitioner

the custody order

the parenting time order

other: _____

B. AN "EXCEPTIONAL CIRCUMSTANCES" HEARING HAS BEEN SET FOR:

(date) _____

I request a hearing to be held within 5 business days after I file this *Request*
*(Note to Respondent: if the Exceptional Circumstances hearing is within 5
business days of filing this Request, you cannot get an earlier hearing)*

I also oppose all or a part of the order as follows *(check all that apply)*:

the order restraining me from contacting, threatening, or attempting to contact
the Petitioner

the custody order

the parenting time order

other: _____

I will will not be represented by an attorney at the hearing
Name and bar number of the attorney (if known): _____

I will need Americans with Disabilities Act accommodations at the hearing

A Confidential Information Form (CIF) has been completed and filed with the court clerk containing all required information that is identified as confidential by UTCR 2.130 for Respondent

Submitted by: Respondent Attorney for Respondent

Date Signature

Name (printed)

Contact Address City, State, ZIP Contact Phone

Attorney for Respondent:

Date Signature

OSB# Name (printed)

Address City, State, ZIP Phone

**NOTICE TO PETITIONERS RECEIVING ELECTRONIC NOTICE
ABOUT RESTRAINING ORDERS**

USE THIS FORM IF:

- You have already provided your email address or cell phone number to the sheriff's office to receive electronic notice when your *Restraining Order* has been served or is about to expire

AND

- Your email address or cell phone number has changed

DO NOT FILE THIS FORM WITH THE COURT

The information below must be provided to the sheriff's office
in the county where the *Restraining Order* was issued

If your contact address or phone number has changed, you must separately inform the court that issued the Order

A common time to use this form is when you are RENEWING or MODIFYING your restraining order. This form can be used ANYTIME a restraining order is in effect and you have changed your email address or cell phone number and still want to receive electronic notice from the sheriff's office about service or expiration.

**PETITIONER'S NOTICE TO SHERIFF'S OFFICE
OF CHANGE OF CONTACT INFORMATION**

Your Name: _____

Respondent's Name: _____

Court Case #: _____

County where *Order* Issued: _____

Your new cell phone number: _____

Cell Carrier (*AT&T, T-Mobile, Verizon. etc.*): _____

Your new email address: _____

INSTRUCTIONS TO CLACKAMAS COUNTY SHERIFF

Court Case No.: _____ I, (print name) _____, the party requesting service in this case hereby request the Sheriff of Clackamas County to serve the following **(DOCUMENT(S) YOU WANT SERVED)**: _____

RISK ANALYSIS

To the best of my knowledge and belief, the party to be served displays or possesses the following **(check all that apply)**:

Weapons (knives, guns, swords, traps). Please specify type and location on property or if the person carries weapon with them: _____

Dogs(s) (breed/location on property): _____

Past violence/Gang/Violent Organization Affiliation (specify activity that leads you to believe this): _____

Mental status impression (or known psychosis)/Drugs/Alcohol Abuse (specify type/frequency): _____

Are there any "NO TRESPASS" signs/gates/cameras

Yes No

Is the property armed/barricaded/counter-surveillance/booby-trap/extremist/paramilitary/police background/terrorist/fortified?

YES NO

PERSON TO BE SERVED

Name/Address: _____

Does this person live at the same address as you? (check one) Yes No

Employment Name/Address (we may be able to serve at their job if it is in Clackamas County): _____

Phone: _____ **Race:** W/B/H **Sex:** M/F/X

Date of Birth: _____ **Height:** _____

Weight: _____ **Hair Color:** _____

Eye Color: _____

Vehicle(s) driven by party (make/ model/ color): _____

Best time(s) to Serve: _____

****If we are serving more than one person ask for additional forms****

YOUR CONTACT INFORMATION

Your Name: _____

Your Safe Mailing Address (this is where we will send your copy of the proof of service):

Your Phone Number (use safe # if this is for protection order): _____

Your Date of Birth (if this is for serving a protection order): _____

FOR OFFICE USE ONLY

Notes: _____

SIGNATURE OF PARTY REQUESTING SERVICE OR ATTORNEY

Signature: _____ Date: _____

***Please note that failure to complete this information could delay the service or execution of your process, or could result in returning your paperwork if it is unclear to the sheriff precisely who you want served, etc. Personal injury to a deputy sheriff could also result by omitting any information. This information will be used solely for the execution of process and for officer safety purposes. Information provided could be subject to disclosure under ORS Chapter 192. Your assistance is greatly appreciated.

Updated 4/19/19

THIRD PARTY SERVICE

The purpose of the *Certificate of Service* form is to show the court that the restraining order and petition were personally delivered to the respondent. By doing this, the court knows that the respondent is aware of what the court has ordered. The order is enforceable once the order has been served, and the proof of service is entered in the Law Enforcement Data System.

Service may be done “by any competent person 18 years of age or older who is a resident of the state where service is made or of this state and is **not a party to the action**, nor an officer, director or employee of, nor attorney for, any party, corporate or otherwise.” (ORCP 7E)

When someone who is not the County Sheriff serves your documents, he/she must follow these instructions exactly. Failure to do so may result in the inability of law enforcement agencies to act on your restraining order.

The *Certificate of Service* form must be filled out ONLY by the person who delivers the papers to the respondent. The *Certificate of Service* must be filled in only after the respondent has been served.

STEPS

1. Serve the **respondent** listed on the restraining order paperwork with the stapled packet of copies marked “**SERVICE COPY.**”
2. Complete two (2) *Certificate of Service* forms (one is for the court, the other is for the Sheriff’s office to enter into the Law Enforcement Data System).
3. For the petitioner’s protection, as soon as possible, hand-deliver the *Certificate of Service* form that is marked, “**CLACKAMAS COUNTY SHERIFF**” and the extra copy of the restraining order that is marked “**SHERIFF COPY**” to the Clackamas County Sheriff’s office, located at: 9101 SE Sunnybrook Blvd., Clackamas, OR 97015, and ask for “Warrants Section.”
4. Your last step is to deliver the *Certificate of Service* form that is marked “**CIVIL CASE UNIT**” to the Clackamas County Circuit Court, located at 807 Main Street, Oregon City, OR 97045. Please file the form on the first floor of the building in room 104, Civil Case Unit.

The Restraining Order will be effective only after the above steps have been completed. If you have any questions, please contact the Civil Case Unit at **503-655-8447, extension 3.**

IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF CLACKAMAS

_____)	_____)	Case No. _____)
Petitioner (your name))	<u>See CIF</u>)	
	(date of birth))	
v.)		
		CERTIFICATE OF SERVICE
		(Family Abuse Prevention Act)
_____)	<u>See CIF</u>)	
Respondent)	(date of birth))	
(full name of person to be restrained))		

I, (name) _____, declare that I am a resident of the County of _____, State of _____.

I am a competent person 18 years of age or older, and not an attorney for, or a party to, this proceeding. I certify that the person served is the identical one named in this action.

On the _____ day of _____ (month), 20____ (year), I served the following:
PETITION TO RENEW RESTRAINING ORDER, ORDER RENEWING RESTRAINING ORDER, and the NOTICE TO RESPONDENT/REQUEST FOR HEARING, AND ANY OTHER (list each): _____

_____ in this case upon the above-named Respondent in person in _____ County, State of _____, at the following address: _____

by delivering to the Respondent a copy of those papers, all of which were certified to be a true copy of the original.

I hereby declare that the above statement is true to the best of my knowledge and belief, and that I understand it is made for use as evidence in court and is subject to penalty for perjury.

Signature of Process Server

Address

Print or Type Name of Process Server

City State Zip

Telephone # _____

IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF CLACKAMAS

_____	<u>See CIF</u>)	Case No. _____
Petitioner (your name)	(date of birth))	
)	
v.)	CERTIFICATE OF SERVICE
)	(Family Abuse Prevention Act)
)	
_____	<u>See CIF</u>)	
Respondent	(date of birth))	
(full name of person to be restrained))	

I, (name) _____, declare that I am a resident of the
County of _____, State of _____.

I am a competent person 18 years of age or older, and not an attorney for, or a party to, this proceeding. I
certify that the person served is the identical one named in this action.

On the _____ day of _____ (month), 20_____ (year), I served the following:
PETITION TO RENEW RESTRAINING ORDER, ORDER RENEWING RESTRAINING ORDER, and the
NOTICE TO RESPONDENT/REQUEST FOR HEARING, AND ANY OTHER (list each): _____

_____ in this case upon the above-named Respondent in person in _____ County,
State of _____, at the following address: _____

by delivering to the Respondent a copy of those papers, all of which were certified to be a true copy of the
original.

**I hereby declare that the above statement is true to the best of my knowledge and belief, and that I
understand it is made for use as evidence in court and is subject to penalty for perjury.**

Signature of Process Server

Address

Print or Type Name of Process Server

City State Zip

Telephone # _____