Instructions for completing a Petition for Protection Order

This form is used to start a domestic violence protection order case. You can ask for advocate services to help you fill out this form. This form will be:

- Filed as a public court record and will start a civil court case.
- Served (personal delivery) to the person from whom you need protection.

This information in the petition is used by the court to determine if:

- The court has authority to enter an order on your behalf.
- If the relationship between you and the other party meets the legal definition of family or household member.
- If the respondent's behavior towards you meets the legal definition of domestic violence.

This is a two-step process. This form is used to request both immediate, temporary protection ***and*** full protection. If you need immediate protection, and the court finds an emergency exists, the court may immediately issue a temporary order that will last until the court holds a hearing.

Please print clearly using blue or black ink.

Top of the form (Page 1)

Fill in your name (first, middle initial, last) as the "Petitioner." The person you want protection from is the "Respondent." Fill in the respondent's name (first, middle initial, last).

Who Needs Protection (Question 1)

The court must know which type of protection is needed. Check one of the boxes in accordance to which type of protection you need after you review the Nooksack Tribal Code (NTC) Title 20A.04 (Domestic Violence Protection Orders) and 20A.08 (Anti-Harassment Protection Orders).

Residency (Question 2)

The court needs to determine if it has jurisdiction to issue a protection order. Answer EACH question a thru f.

Restrained Person (Question 3)

Fill in "Restrained Person" information: Full name, address, telephone number, email address, check box on restrained person's age.

Protected Person (Question 4)

Fill in "Protected Person" information: Full name, check box if "minor children" need protection as well, fill in name, age, sex, lives with, how related to you, how related to restrained person.

Nooksack Tribal Court
PO Box 157 | 4971 Deming Rd
Deming, WA 98244
(360) 305-5125

Service Address (Question 5)

Service address is needed to receive legal documents; email address if you agree to be served by email.

Parties relationship (Question 6)

Please check how you know each other.

Court Cases (Question 7)

This may not be the first court proceeding involving you, or the minors, and the respondent. The court will need to know about other cases, such as divorce, parentage or criminal, 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 orders involving you, or the minors, and the respondent, list the case title (the parties' names), the case number (if you know it), and the court (tribal, district, municipal, or superior) and the county in the columns provided.

Request for Protection Needed (Question 8)

In this section, you must tell the court what you want the court to order now and after the hearing (the relief requested). The court can only grant the relief you request in the petition.

Some provisions allow you to ask the court to protect you, all the minors listed in paragraph 5 or only minors you name. Some provisions allow you to specify which locations you want included in the protection. Be sure to check the boxes to specify which people and places you want protected within each restraint provision.

A. Asks the court to **restrain** the respondent from causing physical harm, or from stalking or harassing you and/or the children you name.

B. Asks the court to **restrain** the respondent from harassing, following, keeping under surveillance, including cyber stalking, or from using telephonic, audiovisual or other electronic means to monitor the actions, locations or communications of you and/or the minors listed in paragraph 5, only the minors you name in this provision. You may also ask for protection in this provision for the victim's adult children and/or any of the victim's household members. Write in the names of the adult children or household members in the space provided.

C. Asks the court to **restrain** the respondent from contacting you and/or the children you name.

D. Asks the court to order the respondent to **vacate** (leave) the home the two of you share and to give you exclusive rights to the home.

E. Asks the court who needs to be protected from the respondent's stalking behavior.

F. Check if you believe monitoring is necessary. This provision asks the court to prohibit the respondent from knowingly coming within or knowingly remaining within specified

distance (i.e. 100 ft. 2 blocks) of your home, workplace or school or daycare. If there is someplace else you want to include, add it to the line called **Q: Asks the court of other request(s):**

G. Asks the court to **order** respondent to evaluation.

H. Asks the court to **order** respondent to treatment.

I. Asks the court to **grant** you possession of essential personal belongings. Please list the personal belongings. ("Essential personal belongings" means those items necessary for a person's immediate health, welfare, and livelihood. "Essential personal belongings" includes but is not limited to clothing, cribs, bedding, documents, medications, and personal hygiene items.)

J. Asks the court to **grant** you use of a vehicle (i.e. blue 1994 Ford Taurus, License Number XYZ123)

K. Asks the court to have restrained person to pay fees and costs this action. (Fees and costs may include court costs, service fees, and reasonable attorney's fees.)

L. Asks the court to **require** the respondent to surrender any firearm, other dangerous weapon, or concealed pistol license, and prohibit the respondent from obtaining or possessing any of those items.

M. Asks the court to **grant** the protected person temporary care, custody and control of child(ren).

N. Asks the court to **require** the respondent to not interfere with protected person's physical or legal custody of child(ren).

O. Asks the court to **require** not to remove minor(s) named in section **4** above.

P. Asks the court to **prohibit** the respondent to attend/go to the elementary, middle, or high school, name school that the protected person attends only if the restrained person and protected person are students at the same school.

Q. Asks the court of **other** request(s):_____

_____

Law Enforcement Assistance (Question 9)

Check the items you want the court to allow you to retrieve from the residence.

You may ask the court to order law enforcement to assist you with certain needs. Check each type of assistance you are requesting.

( ) 1. **Returning to your home.**
Ask the court to order law enforcement to assist you in safely returning to your home. For your safety, you may request a police escort.

( ) 2. **Using your vehicle**
Ask the court to order law enforcement to assist you in getting or using your vehicle.)

( ) 3. **Retrieving personal belongings (Civil Standby)**
Ask the court to order law enforcement to assist you in retrieving your personal belongings from a shared residence, the other person's residence, or another location. A civil standby is when a law enforcement officer is present while you retrieve your belongings. Contact law enforcement to schedule a civil standby. Officers have limited time and availability and must consider safety when scheduling a standby.

( ) 4. **Getting custody of your child/ren**
As the court to order law enforcement to assist you in obtaining custody of the child/ren listed in your petition. Additional court steps may be required before this request can be enforced.

( ) 5. **Other assistance**
Use this option to ask the court for another assistance from law enforcement that is not listed above.)

Length of Order (Question 10)
Check how long you would like the order to remain in effective and explain why.

Please review the section you just completed to ensure that you checked the boxes to show which provisions you want in the protection order. In each provision, be sure you checked the boxes to identify the people and places you want protected.

Emergency Temporary Protection (Question 11 and 12)

You might want immediate emergency temporary protection effective immediately, lasting up to 15 days, until the court hearing.

11. **Temporary Protection Order.**
Ask the court to issue a Temporary Protection Order right away, without first notifying the other person (respondent). ( )Yes ( )No

12. **Temporary surrender of firearms or dangerous weapons**
Ask the court to order the other person to temporarily give up any firearm or other dangerous weapon without first notifying them. This may be requested if someone could suffer serious or permanent injury if the order is delayed until the hearing. ( )Yes ( ) No

Statement of Petitioner — Questions 13–19
Why is this statement important?
Use this section to tell the court **why you need a Protection Order**. Your statement will become part of the court record and will be provided to the respondent.
Include all incidents that you want the court to consider. If you do not describe a specific incident in your statement, you may not be able to tell the court about it at the hearing.
What is domestic violence?

Domestic violence includes physical harm, injury, assault, sexual assault, stalking, or actions that make you fear that you or another person may be seriously harmed. It can happen between family or household members.

Before you begin

Read through Questions 13–19 before you start writing. There are several places in this section where you can describe what happened.

Tell the court what happened

Describe what happened when you were threatened, hurt, or afraid for your safety. Include as much detail as you can, such as:

- What happened
- When and where it happened
- What the respondent said or did
- Who witnessed what happened
- Any injuries you had
- Whether you received medical treatment
- Whether the police were contacted
- The more details you provide, the better the judge can understand what happened and why you are asking for a Protection Order.

- **If you need immediate protection**
- If you believe you or someone else is in immediate danger, explain why. This information can help the court decide whether a temporary Protection Order is needed before the hearing.
- You may also want to include:
- Whether the respondent has hurt or threatened other people.
- Whether the respondent has ever been arrested.
- Whether police have responded to an incident, even if no one was arrested.

Examples:

It is better to say "On Sunday, January 13, at 2:00 a.m., Terry slapped my face." Rather than "On Sunday Terry assaulted me."

It is better to say "Terry threatened to kill me if I left the house. He said 'You leave and I will kill you.'" Rather than "Terry threatened me."

It is better to say "Terry drives by me while I'm waiting at the bus stop after work every Monday evening." Rather than "Terry is stalking me."

It is better to say "Terry sends me emails or text messages [include number] times a day. I texted Terry to stop; but Terry keeps sending the messages." Rather than "Terry cyber stalks me."

Try to use the respondent's exact words when you were threatened with physical harm.

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

Choose appropriate box (alcohol, drugs, or other) if substance abuse is involved.

Sign the Form

When you finish the form:

- Enter today's date and the city where you are completing the form.
- Sign your name and print your name.

Your address: The respondent has the right to receive documents related to this petition. You may keep your home address confidential. If you choose to keep it confidential, provide a different address where you can safely receive legal documents.

Law Enforcement and Confidential Information Sheet (LECIF)

You must complete the LECIF. This form is **confidential** and is not part of the public court record or given to the respondent.

Law enforcement uses this information to **identify and locate the respondent, serve court documents, and enter the Protection Order into the statewide database.**

Provide as much information as possible, especially the respondent's **full name and date of birth.**

If the respondent has a **disability, brain injury, or other condition** that may affect service, provide any information that may help law enforcement. 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."

IN THE NOOKSACK TRIBAL COURT
FOR THE NOOKSACK INDIAN TRIBE
DEMING, WASHINGTON

Petitioner *(Person starting this case)* DOB	**Case No.**
vs.	**Petition for Protection Order**
Respondent *(Person responding to this case)* DOB	

Petition for Protection Order

What kind protection order do you want? There are different orders based on the type of harm and how the parties know each other. See definitions in Attachment A. If you have questions about the law concerning Protection Orders, please review Nooksack Tribal Code (NTC) Title 20A.04 (Domestic Violence Protection Orders) and 20A.08 (Anti-Harassment Protection Orders)

1. **Choose the type of protection order that best fits your situation. *Check only one.***

[ ] Domestic Violence – Protection from an intimate partner or family or household member who has committed domestic violence, nonconsensual sexual conduct or penetration, unlawful harassment, or stalking.

[ ] Anti-Harassment – Protection from someone who has committed unlawful harassment.

2. **Jurisdiction.**

a. Are the following persons members of the Nooksack Tribe? or other federally recognized Tribe?

Petitioner: Yes_____ No_____

Respondent: Yes_____No_____

b. Are the following persons members of another federally recognized Tribe?

Petitioner: Yes_____ No_____. If yes, which Tribe?_____

Respondent: Yes_____No_____. If yes, which Tribe?_____

c. Where did the events which form the basis of the request for a protection order take place?

_____

_____

_____

_____

_____

d. Are minor children for whom protection is sought members of the Nooksack Tribe, or other federally recognized Tribe?

Name_____ Yes_____No_____ Child's Age _____

Name_____Yes_____No_____ Child's Age _____

Name_____Yes_____No_____ Child's Age _____

Statement of authority under Nooksack Tribal Code §20A.03.020 to file this petition for the other person:

[ ] The person, or one of persons, for whom I am filing this petition is under the age of 18 years and I have legal responsibility for him or her.

[ ] The person, or one of the persons for whom I am filing this petition is under the age of 14 years and

[ ] I am the child's parent guardian or other family or household member and not the alleged abuser; or

[ ] I am an adult relative, friend or other representative; or

[ ] I am a representative of Nooksack Youth and Family Services.

e. Long Arm Jurisdiction

_____ The Respondent is living or has lived in a marital relationship subject to the Tribe's jurisdiction, notwithstanding departure from Tribal territory, and one party to the marriage continues to reside within tribal territory.

_____ The Respondent is the parent, custodian, or other person with a legal interest in an Indian child.

Other facts upon which Long Arm Jurisdiction is based:

_____
_____
_____
_____

f. Where do Petitioner and/or minor children for whom protection is sought reside? This is the address where the Petitioner would like to receive notices from the Nooksack Tribal Court. *(This address will be kept confidential)*

_____
_____
_____

Email Address:_____

Telephone Number:_____

Who are the people involved? These are the "parties" to the case.

3. Who should the order restrain? ("Restrained Person")

Name:_____

Address:_____

_____

_____

Telephone Number:_____

Email Address:_____

Restrained Person's age: [ ] 18 or over [ ] unknown

4. Who should the order protect? ("Protected Person") (*Check all that apply.*)

[ ] **Me.** My name is _____

[ ] **Minor Children.**

[ ] I am the minor's [ ] parent [ ] legal guardian [ ] custodian.

[ ] I am age 18 or older and the minor is a member of my family or household. (*For domestic violence petitions only.*)

Child's Name	Age	Sex	Lives With	How related to you	How related to Restrained Person

5. Service address. What is your address for receiving legal documents? You have the right to keep your residential address private. You may use a different mailing address.

Mail:_____

Email (*if you agree to be served by email*):_____

How do the parties know each other?

6. Check all the ways the protected person is connected or related to the restrained person:

Family or household members - Protected person and restrained person are family or household members because they are:

[ ] parent and child
[ ] stepparent and stepchild
[ ] parent's intimate partner and child
[ ] grandparent and grandchild
[ ] current or former cohabitants as roommates
[ ] person who is or has been a legal guardian
[ ] related by blood or marriage (*specify how*) _____
[ ] are in or have been in a dating relationship *(see NTC 20A.01.060 (F))*

Other (examples: coworker, neighbor, acquaintance, stranger)

_____

Are there other court cases involving the parties or any children?

7. **Other court cases.** Have there been any other court cases between any of the people involved in this case or about any children? Include court cases happening now and in the past and requests for protection that were denied or have expired. *(Examples: criminal no contact order, civil protection order, family law restraining order, protection order from another state, tribal order, military orders, parenting plans, divorce, landlord-tenant, employment, property, assault, police investigations. File copies in this court case of everything you want the court to review.)*

[ ] No [ ] Yes. If yes, fill out below.

Type of Case (*see examples*)	**Court Location** (*City or County and State*)	**Court Type** (*Superior / District / Municipal / Tribal / Military*)	**Case Number** (*if known*)	**Status** (active / *dismissed / pending / expired, unknown*)

Other details: _____

_____

_____

_____

What protections do you need? Check everything you want the court to order.

8. **I ask for a protection order with these restraints:**

General Restraints

A. [ ] **No Harm:** Do not commit or threaten to commit acts of domestic violence [ ] protected person [ ] the minors named in section **4** above
[ ] these minors only:_____

B. [ ] **No Contact:** Do not have any contact, harass, annoy, telephone or otherwise communicate with:
[ ] the protected person [ ] the minors named in section **4** above
[ ] these minors only:_____
[ ] **Exception** (if any): Only this type of contact is allowed:_____
_____

C. [ ] **Exclude and Stay Away**: Do not enter, return to, knowingly come within, or knowingly remain within _____ feet or other distance *(specify)* _____ of
[ ] the protected person
[ ] protected person's vehicle
[ ] protected person's school
[ ] protected person's workplace
[ ] protected person's residence
[ ] protected person's adult day program
[ ] the shared residence
[ ] the residence, daycare, or school of [ ] the minors named in section **4** above
[ ] these minors only:_____
[ ] other:_____

Address: The protected person chooses to (*check one*)
[ ] keep their address confidential [ ] list their address here:
_____

D. [ ] **Vacate shared residence:** The protected person has exclusive right to the residence that the protected person and restrained person share. The restrained person must immediately vacate the residence. The restrained person may take the restrained person's clothing, personal items needed during the duration of the order, and these items (*specify*):_____ from the residence while a law enforcement officer is present.

E. [ ] **Stalking Behavior:** Do not harass, follow, monitor, keep under physical or electronic surveillance, or use phone, video, audio or other electronic means to record, photograph, or track locations or communication, including digital, wire, or electronic communication of
[ ] the protected person [ ] the minors named in section **4** above
[ ] these minors only:_____
[ ] these members of the protected person's household :_____
_____

F. [ ] **Electronic Monitoring:** The restrained person must submit to electronic monitoring. *(Restrained person must be age 18 or older.)*

G. [ ] **Evaluation:** The restrained person shall get an evaluation for:
[ ] mental health [ ] chemical dependency (drugs)

H. [ ] **Treatment:** The restrained person shall participate in state-certified treatment for:
[ ] sex offender [ ] domestic violence perpetrator

I. [ ] **Personal Belongings:** The protected person shall have possession of essential personal belongings, including the following:

_____

_____

J. [ ] **Vehicle**: The protected person shall have use of the following vehicle:

Year, Make & Model _____ License No._____

K. [ ] **Pay Fees and Costs:** The restrained person must pay fees and costs of this action. This may include administrative court costs, service fees, and the protected person's costs including lawyer fees.

OTHER RELIEF NTC 20A.03.070 (C)(8)

Firearms and Other Dangerous Weapons

L. [ ] **Surrender Weapons:** The restrained person must immediately surrender to law enforcement and not access, possess, have in their custody or control, purchase, receive, or attempt to purchase or receive firearms, other dangerous weapons, or concealed pistol licenses.

Important! *The court may be required to order the restrained person to surrender firearms, other dangerous weapons, or concealed pistol licenses even if you do not request it.*

Does the restrained person have or own firearms?
[ ] Yes [ ] No [ ] Unknown

Would the restrained person's use of firearms or other dangerous weapons be a serious and immediate threat to anyone's health or safety?
[ ] Yes [ ] No [ ] Unknown

Even if the restrained person does not have firearms now, has the restrained person ever used firearms, other weapons or objects to threaten or harm you?
[ ] Yes [ ] No

If Yes, describe what happened.

_____

_____

_____

_____

Is the restrained person already not allowed to have firearms?
[ ] Yes [ ] No [ ] Unknown

If Yes, why?

_____

Other Relief:

_____

_____

_____

Minors **NTC §20A.03.070 (C)(6) and NTC 20A.03.070 (C)(8)**

M. [ ] **Custody:** The protected person is granted temporary care, custody and control of
[ ] the minors named in section **4** above
[ ] these minors only:_____

N. [ ] **Interference:** Do not interfere with the protected person's physical or legal custody of
[ ] the minors named in section **4** above
[ ] these minors only:_____

O. [ ] **Removal from Whatcom County**: Do not remove from Whatcom County:
[ ] the minors named in section **4** above
[ ] these minors only:_____

P. [ ] **School Attendance:** Do not attend the elementary, middle, or high school *(school name)* _____, that a protected person attends. *(Only if both the restrained person and a protected person are students at the same school. Can apply to students 18 or older. Includes public and private schools.)*

Describe any continuing physical danger, emotional distress, or educational disruption to a protected person that would happen if the restrained person attends the same school.

_____

_____

_____

_____

Other:

Q. _____

_____

_____

_____

Do you need help from law enforcement? They may help you get the things you asked for.

9. **Law Enforcement Help:** Do you want the court to order the appropriate law enforcement agency to help you with any of the things listed below?
Check all that apply.
[ ] Possession of my residence.
[ ] Possession of the vehicle I asked for in section **L** above.
[ ] Possession of my essential personal belongings that are located at
[ ] the shared residence
[ ] the restrained person's residence
[ ] other location _____
[ ] Custody of [ ] the minors named in section **4** above
[ ] these minors only _____
[ ] Other:_____

How long do you need this order to last?

10. **Length of Order**
(*The order will last for* ***at least one year*** *unless you ask for something different. Orders restraining a parent from contacting their own children may not exceed one year.*)

I need this order to last for: [ ] 1 year [ ] more than 1 year [ ] less than 1 year (*specify how long*):_____

If you checked more or less than one year, briefly explain why.

_____

_____

_____

Do you need immediate protection? If needed, you can ask for a Temporary Protection Order that starts now, before the restrained person gets notice. This protection can last up to 15 days or until the court hearing (whichever comes first).

11. **Immediate Protection:** Do you need a Temporary Protection Order to start immediately, without prior notice to the restrained person? [ ] Yes [ ] No

12. **Immediate Weapons Surrender:** Do you want a temporary order that requires the restrained person give up all firearms, other dangerous weapons, and concealed pistol licenses right away, and prohibits the restrained person from getting more?
[ ] Yes [ ] No

Why do you need a protection order? What happened? This is your statement, where you tell your experience.

Be as specific and descriptive as possible. Put the date, names, what happened and where. Use names rather than pronouns (he/she/they) as much as possible. If you cannot remember the date, put the time of year it happened (around a holiday, winter, summer, how old your child was) or about how long ago.

For all of the questions below, include details:

- Who did what?
- When did this happen?
- How were any statements made? (in person, mail, text, phone, email, social media)
- How did this make you, the minor, or the vulnerable adult feel?

If you need more space to answer any of the questions below, use form PO 010 Statement or attach additional pages.

13. **Most Recent Incident.** What happened most recently that made you want a protection order? This could include violent acts, fear or threats of violence, coercive control, nonconsensual sexual conduct or penetration, sexual abuse, harassment, stalking, hate crimes.

14. **Past Incidents.** What happened in the past that makes you want a protection order? This could include violent acts, fear or threats of violence, coercive control, nonconsensual sexual conduct or penetration, sexual abuse, harassment, stalking, hate crimes. For a vulnerable adult, include incidents or threats of abandonment, abuse, neglect and/or financial exploitation. Include specific date/s and details of the incidents.

15. **Medical Treatment.** Describe any medical treatment you received for issues related to your request for protection.

If Yes to 14 or 15, explain why: What serious immediate harm or irreparable injury could occur if an order is not issued immediately without prior notice to the restrained person?
(Briefly explain how you or anyone else might be harmed if you do not get protection now.)

16. **Suicidal Behavior.** Describe any threats of self-harm or suicide attempts by the restrained person.

17. **Restrained Person's Substance Abuse**

Is substance abuse involved?	[ ] Yes	[ ] No	[ ] Unknown
If yes, what type of substance abuse?	[ ] Alcohol	[ ] Drugs	[ ] Other

18. **Minors Needing Protection, if any** *(If the information is not already included above.)*

Has there been any violence or threats towards children? How have the children been affected by the restrained person's behavior? Were the children present during any of the incidents described above? Describe and give details.

19. Supporting Evidence *(If you have anything else you want the court to see that helps prove what you are saying is true.)*

[ ] I am attaching the following evidence to this Petition *(check all that apply):*

- [ ] Pictures
- [ ] Text / email / social media messages
- [ ] Voice messages (written transcript)
- [ ] Written notes / letters / mail
- [ ] Police report
- [ ] Declaration or statement from witness (name/s):_____
- [ ] Other (describe):_____

Privacy Warning! The restrained person will see this Petition and any other evidence you file with the court. This information is also available to the public for anyone to see.

Before you file any attachments, you can black out (redact) any sensitive information. Examples: your home address and account numbers (leave last four digits).

I certify under penalty of perjury under the laws of the Nooksack Indian Tribe and the laws of the State of Washington that all the information provided in this petition and any attachments is true and correct.

[ ] I have attached *(number):*____ pages.

Signed at *(City and State):*_____ Date:_____

▶_____ _____

Sign here *Print name*

ATTACHMENT A - DEFINITIONS

Family or Household Member – NTC 20A.01.060 (K)

"Family or household member" means spouses, domestic partners, former spouses, former domestic partners, persons who have a child in common regardless of whether they have been married or have lived together at any time, adult persons related by blood or marriage, adult persons who are presently residing together or who have resided together in the past, persons sixteen years of age or older who are presently residing together or who have resided together in the past and who have or have had a dating relationship, persons sixteen (16) years of age or older with whom a person sixteen (16) years of age or older has or has had a dating relationship, and persons who have a biological or legal parent-child relationship, including stepparents and stepchildren and grandparents and grandchildren.

Domestic Violence – NTC 20A.01.060 (G)

"Domestic violence" is: (a) physical harm, bodily injury, assault, or the infliction of fear of imminent physical harm, bodily injury or assault, between family or household members; (b) sexual assault of one family or household member by another; or (c) stalking as defined in Nooksack Criminal Code 20.02.190 of one family or household member by another family or household member.

Unlawful Harassment and Course of Conduct – NTC 20A.08.030

"Course of Conduct" means a pattern of conduct composed of a series of acts over a period of time, however short, evidencing a continuity of purpose. "Course of conduct" includes, in addition to any other form of communication, contact or conduct, the sending of an electronic communication; it does not include constitutionally protected free speech. Constitutionally protected activity is not included within the meaning of "course of conduct".

"Unlawful Harassment" means a knowing and willful course of conduct directed at a specific person which seriously alarms, annoys, harasses or is detrimental to such person, and which serves no legitimate or lawful purpose. The course of conduct shall be such as would cause a reasonable person to suffer substantial emotional distress, and shall actually cause substantial emotion distress to the petitioner, or, when the course of conduct would cause a reasonable parent or guardian to fear for the well-being of their child.

IN THE NOOKSACK TRIBAL COURT
FOR THE NOOKSACK INDIAN TRIBE
DEMING, WA

_____,
Petitioner,

vs.

_____,
Respondent.

Case No. _____

SUMMONS

To: _____

_____

_____

To the Respondent: The Plaintiff/Petitioner has started a case against you in Nooksack Tribal Court. The Complaint or Petition served upon you tells you what the Plaintiff/Petitioner is asking for.

You must respond in writing for the court to consider your side.

Deadline! Your *Response* must be filed with the Court and served on Petitioner within **20 days** of the date you were served this *Summons.* If the case has been filed in court, you must also file your *Response* by the same deadline.

If you do not file and serve your *Response* or a *Notice of Appearance* by the deadline:

- No one has to notify you about other hearings in this case, and
- The court may approve the Petitioner's requests without hearing your side. (This is called a *default judgment.*)

Lawyer not required. It is a good idea to talk to a lawyer, but you may file and serve your *Response* without one.

Follow these steps:

1. **Read** the *Petition* and any other documents you receive with this *Summons*. These documents explain what Petitioner is asking for.

2. **Prepare a** *Response* to the Petition.

3. Have a copy of your *Response* served on at the petitioner's address. You may not serve the Response yourself but must have it served by a person over the age of 18 who is competent to be a witness in this case, but who is not a party to this case.

4. **File** your original *Response* with the clerk of the court at the court's address for filing.

YOU ARE HEREBY NOTIFIED THAT A JUDGMENT WILL BE TAKEN AGAINST YOU IN ACCORDANCE WITH THE TERMS OF THE PETITION OR COMPLAINT UNLESS YOU TIMELY FILE A RESPONSE WITH THE COURT.

Dated this ____ day of _____.

_____

Signature

CIVIL

Whatcom COUNTY SUPERIOR COURT

Case Information Cover Sheet (CICS)

Case Number _____ **Case Title** _____

Attorney Name _____ **Bar Membership Number** _____

Please check one category that best describes this case for indexing purposes. Accurate case indexing not only saves time in docketing new cases, but helps in forecasting needed judicial resources. Cause of action definitions are listed on the back of this form. Thank you for your cooperation.

Form updated 12/28/2020

☐	ABJ	Abstract of Judgment
☐	ABL	Abusive Litigation
☐	ALR	Administrative Law Review
☐	ALRJT	Administrative Law Review-Jury Trial (L&I)
☐	BAT	Ballot Title
☐	CHN	Non-Confidential Change of Name
☐	CBC	Contractor Bond Complaint
☐	COL	Collection
☐	CON	Condemnation
☐	COM	Commercial
☐	CRP	Pet. for Cert. of Restoration of Opportunity
☐	DOL	Appeal Licensing Revocation
☐	DVP	Domestic Violence
☐	EOM	Emancipation of Minor
☐	FJU	Foreign Judgment
☐	FOR	Foreclosure
☒	FPO	Foreign Protection Order
☐	HAR	Unlawful Harassment
☐	INJ	Injunction
☐	INT	Interpleader
☐	LCA	Lower Court Appeal – Civil
☐	LCI	Lower Court Appeal – Infractions
☐	LUPA	Land Use Petition Act
☐	MAL	Other Malpractice
☐	MED	Medical Malpractice
☐	MHA	Malicious Harassment
☐	MSC2	Miscellaneous – Civil
☐	MST2	Minor Settlement – Civil (No Guardianship)
☐	PCC	Petition for Civil Commitment (Sexual Predator)
☐	PFA	Property Fairness Act
☐	PIN	Personal Injury
☐	PRA	Public Records Act
☐	PRG	Property Damage – Gangs
☐	PRP	Property Damages
☐	QTI	Quiet Title
☐	RDR	Relief from Duty to Register
☐	RFR	Restoration of Firearm Rights
☐	SDR	School District-Required Action Plan
☐	SER	Subdivision Election Process Law Review
☐	SPC	Seizure of Property-Commission of Crime
☐	SPR	Seizure of Property-Resulting from Crime
☐	STK	Stalking Petition
☐	SXP	Sexual Assault Protection
☐	TAX	Employment Security Tax Warrant
☐	TAX	L & I Tax Warrant
☐	TAX	Licensing Tax Warrant
☐	TAX	Revenue Tax Warrant
☐	TMV	Tort – Motor Vehicle
☐	TRJ	Transcript of Judgment
☐	TTO	Tort – Other
☐	TXF	Tax Foreclosure
☐	UND	Unlawful Detainer – Commercial
☐	UND	Unlawful Detainer – Residential
☐	VAP	Vulnerable Adult Protection Order
☐	VEP	Voter Election Process Law Review
☐	VVT	Victims of Motor Vehicle Theft-Civil Action
☐	WDE	Wrongful Death
☐	WHC	Writ of Habeas Corpus
☐	WMW	Miscellaneous Writs
☐	WRM	Writ of Mandamus
☐	WRR	Writ of Restitution
☐	WRV	Writ of Review
☐	XRP	Extreme Risk Protection Order
☐	XRU	Extreme Risk Protection Order Under 18

IF YOU CANNOT DETERMINE THE APPROPRIATE CATEGORY, PLEASE DESCRIBE THE CAUSE OF ACTION BELOW

Please Note: Public information in court files and pleadings may be posted on a public Web site.

Law Enforcement and Confidential Information (LECIF)

Clerk: Do <u>not</u> file in a public access file. In criminal cases, do not file. Give to law enforcement.

_____ Court of Washington

County:_____

Case No.:_____

Law Enforcement: Do **not** serve or show a **completed** LECIF to the other party.

Instructions – The **Protected Person** must complete this form. Fill out **all** sections as much as you can. If you do not know, write "unknown."
Type or print clearly! If law enforcement cannot read this form, they cannot serve or enforce your order!

1. Restrained Person's Info

Name: First	Middle	Last	Date of Birth (if unknown give age range)	
Nickname/Alias/AKA ("Also known as")			Relationship to Protected Person	
Sex	Race		Height	Weight
Eye Color	Hair Color		Skin Tone	Build
Phone/s with Area Code (voice):		Need Interpreter? [ ] No [ ] Yes Language:		

2. Where can the Restrained Person be served? List all known contact information.

Last Known Address. **Street:**		
City:	State:	Zip:
Cell number (text):	Email:	
Social Media Account/s & User Name/s:		
Other:		

Employer	Employer's Address		Employer's Phone
Work Hours	Driver's License or ID number		State
Vehicle Make and Model	Vehicle License Number	Vehicle Color	Vehicle Year

3. Disability, hazard, and weapon info about the Restrained Person

Law enforcement needs this info to serve the order safely

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 (add pages, if needed):_____

Hazard Information Restrained Person's History includes:

[ ] Involuntary/Voluntary Commitment [ ] Suicide Attempt or Threats (How recent?)_____

[ ] Threats to "suicide by cop" [ ] Assault [ ] Assault with Weapons [ ] Alcohol/Drug Abuse
[ ] Other:_____

Concealed Pistol License: [ ] Yes [ ] No

Weapons: [ ] Handguns [ ] Rifles [ ] Knives [ ] Explosives [ ] Unknown

[ ] Other (include unassembled firearms and specify):_____

Location of Weapons: [ ] Vehicle [ ] On Person [ ] Residence Describe in detail:

_____

_____

Current Status

Is the restrained person a current or former cohabitant as an intimate partner? [ ] **Yes** [ ] **No**

Are you and the restrained person living together now? [ ] **Yes** [ ] **No**

Does the restrained person know they may be moved out of the home? [ ] **Yes** [ ] **No** [ ] **N/A**

Does the restrained person know you are trying to get this order? [ ] **Yes** [ ] **No**

Is the restrained person likely to react violently when served? [ ] **Yes** [ ] **No**

4. Protected Person's Info

Name: First	Middle	Last	Date of Birth	
Sex	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 below.

Current Address. Street: City: State: Zip:	Phone(s) w/Area Code
Email address:	Need interpreter? [ ] No [ ] Yes If yes, language:

If your info ***is confidential***, you must give a name, address, and phone 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:

5. Minor's Info

For relationship, use terms such as child, grandchild, stepchild, nephew, or none.

1	**Name:** First	Middle	Last	
	Birth Date	Sex	Race	Resides With
	Relationship to Protected Person:		Relationship to Restrained Person:	
2	**Name:** First	Middle	Last	
	Birth Date	Sex	Race	Resides With
	Relationship to Protected Person:		Relationship to Restrained Person:	
3	**Name:** First	Middle	Last	
	Birth Date	Sex	Race	Resides With
	Relationship to Protected Person:		Relationship to Restrained Person:	
4	**Name:** First	Middle	Last	
	Birth Date	Sex	Race	Resides With
	Relationship to Protected Person:		Relationship to Restrained Person:	

[ ] **More than 4 minors are protected.** (Attach a page to list more children and their details.)

6. Protected Household Members or Adult Children

Name:	birth date:
Name:	birth date:
Name:	birth date:
Name:	birth date:

Privacy Notice: Only court staff, law enforcement, and some state agencies may see this form. The other party and their lawyer may not see this form unless a court order allows it. State agencies may disclose the information in this form according to their own rules.

Changes: If any information changes, fill out another copy of this form and file it with the court clerk.

I declare under penalty of perjury under the laws of the State of Washington that: 1) the information on this form about me is true and correct; 2) the information about the other party is the legitimate, current, or last known contact information.

I have attached ____ pages.

Signed at *(City and State)*:_____ Date:_____

▶

_____ _____

Sign here Print name here