

If Attorney or ProSe filing, type Name, Address and phone number below:

IN THE FAMILY COURT OF THE SECOND CIRCUIT

STATE OF HAWAI'I

)	EX PARTE PETITION FOR AN HRS 586
)	TEMPORARY RESTRAINING ORDER
)	
Petitioner,)	
)	
vs.)	REVIEWED & DENIED
)	
)	DATED: _____
)	
)	_____
Respondent.)	Judge, Family Court, Second Circuit

EX PARTE PETITION FOR AN HRS 586 TEMPORARY RESTRAINING ORDER

This Petition is made pursuant to Hawaii Revised Statutes Chapter 586. Petitioner in support of this Petition states that:

- I reside on the island of: Maui Molokai Lanai.
- The following individual(s) live with me in my residence:

Name	Relationship to Me	Birth Year	Age

3. The following animals belonging to the household in need of protection:

Name	Species

4. I have the following relationship with the Respondent above named:

- A. we are married.
- B. we were married.
- C. we have the following child/children in common:

Child(ren)'s Names	Birth Year

- D. we are parent and child.
- E. we are related by blood as follows: _____
- F. we lived together in the same dwelling unit from _____ to _____
(Does not include those who are, or were, adult roommates or cohabitants only by virtue of an economic or contractual affiliation)
- G. we are now living together.
(Does not include those who are, or were, adult roommates or cohabitants only by virtue of an economic or contractual affiliation)
- H. we are or were in a dating relationship
 1. Length of our relationship (number ____ years ____ months ____ days)
 2. Nature of our relationship is/was
 - romantic
 - a courtship
 - an engagement
 - intimate or sexual
 - a casual relationship
 - ordinary fraternization in business/social contact
 Frequency of interaction ____ times per day week month.

5. Petitioner's year of birth is: _____
 Petitioner's Social Security Number is: XXX-XX-_____

Respondent's year of birth is: _____
 Respondent's Social Security Number is: XXX-XX-_____

6. The most recent acts of domestic abuse or threats of domestic abuse against me are:

In the past the Respondent has committed the following acts of domestic abuse or threats of domestic abuse against me and other people:

The Respondent has used weapons against me or threatened to use weapons in the following incidents:

I believe the Respondent may own, possess, have access to, or intends to obtain or to transfer ownership of firearm(s)/electric gun(s) (e.g., stun gun, Taser) or ammunition. The reason I believe this is (include description of firearm(s)/electric gun(s) and present location):

I believe that the Respondent may use a firearm/electric gun (e.g., stun gun, Taser) to threaten, injure or abuse me or someone because:

[] We live together at _____.
It is necessary that I have exclusive occupancy of our joint residence until the court hearing because:

[] Until there is a court hearing I am concerned about Respondent having contact with our minor child(ren) listed below because:

Child(ren)'s Names	Birth Year

[] Until there is a court hearing I am concerned about Respondent having contact with the following people who live with me because:

Name	Birth Year

- [] Until there is a court hearing I am concerned about Respondent having contact with the following family members **who do not live with me**, because:

Name	Relationship to me	Birth Year

- [] Until there is a court hearing I am concerned about Respondent having contact with the animals belonging to the household because:

Name	Species

- [] I would like the Court to be aware of the following additional matters in considering my application for a protective order:

- [] I am or have been involved in other legal proceedings involving the Respondent as follows:

Case Name: _____

Case number: _____

Location of Court: _____

Date filed: _____ Date concluded: _____

Type of case: _____

Petitioner asks the Court to immediately issue an Ex Parte Temporary Restraining Order of Protection that orders the Respondent and any other person acting on behalf of the Respondent:

1. Not to threaten or physically abuse the Petitioner, or any other person residing with the Petitioner.
2. Not to have any contact with the Petitioner, in person, in writing, by telephone, text message, voice message, instant message, email or communicating through any social networking site, including where the Petitioner lives, works or goes to school.
3. Do not approach or come within **100 feet** of the Petitioner.
4. Do not visit or approach within **100 yards** of any place where the Petitioner lives or works or goes to school.

To vacate the residence at:

Not to have contact with the following minor child(ren) of the parties until a court hearing occurs:

Child(ren)'s Names	Birth Year

Have unsupervised contact with the following minor child(ren) of the parties until a court hearing occurs, as follows:

Child(ren)'s Names	Birth Year

- [] Arrange for supervised visits with the following minor child(ren) of the parties by telephoning _____ at _____ .
(Phone number)

Child(ren)'s Names	Birth Year

- [] Not to have any contact with the following people who live(s) with me:

Name	Birth Year

- [] Not to have any contact with the following family member(s) of the petitioner who do not live with me:

Name	Relationship to Me	Birth Year

- [] Do not take, conceal, remove, threaten, physically abuse or otherwise dispose of the following animals belonging to the household:

Name	Species

I understand that if the court grants the relief that I have requested the court order will be in effect until a court hearing can be scheduled. I also understand that the terms of this order must be followed until the court hearing and that I can request changes in the order at the court hearing.

The Movant declares under penalty of perjury, that the statements made herein are true and correct to the best of the Movant's knowledge, information and belief.

Date

Movant's Signature

Assisted by: _____



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation:

Call (808) 244-2855 FAX (808) 244-2932 OR Send an e-mail to: adarequest@courts.hawaii.gov. The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.