

_____ County

In The General Court Of Justice
District Court Division

Name Of Plaintiff (Person Filing Complaint)

VERSUS

Name And Address Of Defendant (Person Accused Of Abuse)

**COMPLAINT FOR
DOMESTIC VIOLENCE
PROTECTIVE ORDER**

G.S. 50B-1, -2, -3, -4

Spoken Language Court Interpreter Needed For Any Party, Victim, Or Witness? (If Yes, identify person(s) and language(s). Interpreters provided for all court proceedings at no cost.)

No Yes: (explain)

(Check only boxes that apply and fill in blanks. Additional sheets may be attached.)

- 1. I live in _____ County, North Carolina.
- 2. The defendant and I are spouses. are former spouses.
 are persons of the opposite sex who are not married but live together or have lived together.
 have a child in common.
 are parent and child or grandparent and grandchild.
 are current or former household members.
 are persons who are in or have been in a dating relationship.
- 3. There is is not another court proceeding between the defendant and me pending in this or any other state.
(List county, state, date, and what kind of proceeding, if applicable.)
- 4. The defendant has attempted to cause or has intentionally caused me bodily injury; or has placed me or a member of my family or household in fear of imminent bodily injury or in fear of continued harassment that rises to such a level as to inflict substantial emotional distress; or has committed a sexual offense against me in that: (Give specific dates and describe in detail what happened.)
- 5. The defendant has attempted to cause or has intentionally caused bodily injury to the child(ren) living with me or in my custody; has placed my child(ren) in fear of imminent serious bodily injury or in fear of continued harassment that rises to such a level as to inflict substantial emotional distress; or has committed a sexual offense against the child(ren) in that: (Give specific dates and describe in detail what happened.)
- 6. I believe there is danger of serious and immediate injury to me or my child(ren).
- 7. (Check this block if you ask for temporary child custody.) The defendant and I are the parents of the following child(ren) under the age of eighteen.

A COPY OF "AFFIDAVIT AS TO STATUS OF MINOR CHILD" (AOC-CV-609) MUST BE ATTACHED FOR EACH CHILD.

Name	Sex	Date Of Birth	Name	Sex	Date Of Birth

(Over)

8. (Fill in the block if you are asking for temporary child custody) The minor child(ren) listed in No 7. above is exposed to a substantial risk of physical or emotional injury or sexual abuse in that: (Describe in detail what happened that created a risk of physical or emotional injury or sexual abuse.)
9. The defendant has firearms and ammunition as described below, has a permit to purchase a firearm, and has a permit to carry a concealed weapon. (Describe all firearms, ammunition, gun permits, and give identifying number(s) if known, and indicate where defendant keeps firearms and gun permits.)
10. The defendant has used or threatened to use a deadly weapon against me or minor child(ren) in my custody or has a pattern of prior conduct involving the use or threatened use of violence with a firearm against any persons in that (Give specific dates and describe in detail what happened.)
11. The defendant has made threats to commit suicide in that (Give specific dates and describe in detail what happened.)

Because Of The Acts Of Domestic Violence By The Defendant, I Am Requesting That The Court Give Me The Following Relief:

(Check only boxes that apply.)

1. I want emergency relief.
2. Since there is a danger of acts of domestic violence against me or my child(ren), I want an Ex Parte Order before notice of a hearing is given to the defendant.
3. I want the Court to order the defendant not to assault, threaten, abuse, follow, harass or interfere with me and my child(ren).
- 3a. I want the defendant ordered not to cruelly treat or abuse an animal owned, possessed, kept, or held as a pet by either party or minor child residing in the household
4. I want possession of our residence at the address listed below, and I want the defendant to move from and not return to the residence.

Address Of Residence

5. I want the Court to order the eviction of the defendant from the residence listed above and I want assistance in returning to the residence.
6. I want possession of the personal property such as clothing and household goods in the residence listed above except for the defendant's personal clothing, toiletries and tools of trade.
- 6a. I want the care, custody, and control of any animal owned, possessed, kept, or held as a pet by either party or minor child residing in the household granted to me.

VERSUS

File No.



Name Of Defendant

- 7. I want the defendant to be ordered not to come on or about:
 - (a) my residence.
 - (b) any place where I am receiving temporary shelter.
 - (c) the place where I work.
 - (d) any school(s) the child(ren) attend.
 - (e) the place where the child(ren) receives day care.
 - (f) the place where I go to school.
 - (g) Other: *(name other places)*

The child(ren) currently attend: *(name school)*

- 8. I want the defendant to be ordered to have no contact with me.
- 9. I want possession and use of the following vehicle:

Describe Vehicle

- 10. I want temporary custody of our minor child(ren) listed in this Complaint. I understand that I must file a separate child custody action for permanent custody.
- 11. I want the defendant to be ordered to make payments for the support of our minor child(ren), as required by law, but I understand it is only temporary and that I must file a separate child support action for regular, permanent child support.
- 12. I want the Court to prohibit the defendant from possessing or purchasing a firearm.
- 13. I want the Court to order the defendant to surrender to the sheriff his/her firearms, ammunition, and gun permits to purchase a firearm and carry a concealed weapon.
- 14. I want the defendant to be ordered to attend an abuser treatment program
- 15. I want the defendant to be ordered to provide me and the child(ren) suitable alternative housing.
- 16. I want the defendant to be ordered to make payments for my support as required by law, but I understand it is only temporary and that I must file a separate action for regular permanent spousal support.
- 17. Other: *(specify)*

Date

Signature Of Plaintiff (Person Filing Complaint)

STATE OF NORTH CAROLINA

File No.

In The General Court Of Justice
District Court Division

County

IDENTIFYING INFORMATION ABOUT DEFENDANT DOMESTIC VIOLENCE ACTION

G.S. 50B-3(d)

Name Of Defendant
Street Address Of Defendant (Not P.O. Box)
City State Zip

INSTRUCTIONS: In order to assist law enforcement agencies in serving and enforcing this Order, if issued by the Court, the following information is requested. It is not required for the issuance of this Order, but may allow law enforcement agencies to locate and more quickly identify the persons involved in this case and to enforce the provisions of this Order more effectively. Answer these questions accurately and honestly.

If you do not know the answer to any of the following questions, leave the question blank.

INFORMATION ABOUT DEFENDANT

Date Of Birth
Race: White Black Indian Asian/Pacific Islander Other
Sex: Male Female
Height Weight Hair Color Eye Color

Identifying Marks (List any marks, scars, tattoos)

Does the defendant have a driver's license or state-issued identification card from any state? Yes No

If yes, provide the state and number if possible: State: Number:

Vehicle description and license plate number:

Social Security No. Of Defendant Telephone No. Of Defendant

The defendant's current work information:

Employer's Business Name
Business Address
Business Telephone No. Defendant's Work Hours (List Work Start Time And Work Stop Time)

Does the defendant have a permit to purchase a handgun or crossbow? Yes No

If yes, state which law enforcement agency issued the permit, if known:

Does the defendant have a permit to carry a concealed handgun? Yes: No

If yes, state which law enforcement agency issued the permit, if known:

Is there any reason that a law enforcement officer should consider the defendant a potential threat (i.e., carries concealed weapons while drinking alcohol, has threatened an officer, etc.)? Yes No

If yes, specify the circumstances:

PLAINTIFF

Date Of Birth
Race: White Black Indian Asian/Pacific Islander Other
Sex: Male Female
Date Name Of Plaintiff (Type Or Print) Signature Of Plaintiff

NOTE TO CLERK OR MAGISTRATE: If an order is issued, a copy of this form should be attached to the appropriate order and forwarded to the sheriff of the issuing court county.

_____ County

Name And Address Of Plaintiff

**SERVICEMEMBERS CIVIL RELIEF ACT
DECLARATION**

VERSUS

Name And Address Of Defendant

G.S. Ch. 127B, Art. 4; 50 U.S.C. 3901 to 4043

NOTE: *Though this form may be used in a Chapter 45 Foreclosure action, it is not a substitute for the certification that may be required by G.S. 45-21.12A.*

DECLARATION

I, the undersigned Declarant, under penalty of perjury declare the following to be true:

1. As of the current date: *(check one of the following)*
 - a. I have personal knowledge that the defendant named above is in military service.*
 - b. I have personal knowledge that the defendant named above is **not** in military service.*
 - c. I am unable to determine whether the defendant named above is in military service.*
2. As of the current date, I have have not received a copy of a military order from the defendant named above relating to State active duty as a member of the North Carolina National Guard or service similar to State active duty as a member of the National Guard of another state. See G.S. 127B-27 and G.S. 127B-28(b).
3. I used did not use the Servicemembers Civil Relief Act Website (<https://scra.dmdc.osd.mil/>) to determine the defendant's federal military service.
 - The results from my use of that website are attached.

(NOTE: *The Servicemembers Civil Relief Act Website is a website maintained by the Department of Defense (DoD). If DoD security certificates are not installed on your computer, you may experience security alerts from your internet browser when you attempt to access the website. Members of the North Carolina National Guard under an order of the Governor of this State and members of the National Guard of another state under an order of the governor of that state will **not** appear in the SCRA Website database.)*

4. The following facts support my statement as to the defendant's military service: *(State how you know the defendant is or is not in the military. Be specific.)*

***NOTE:** *The term "military service" includes the following: active duty service as a member of the United States Army, Navy, Air Force, Marine Corps, Space Force, or Coast Guard; service as a member of the National Guard under a call to active service authorized by the President or the Secretary of Defense for a period of more than 30 consecutive days for purposes of responding to a national emergency; active service as a commissioned officer of the Public Health Service or of the National Oceanic and Atmospheric Administration; any period of service during which a servicemember is absent from duty on account of sickness, wounds, leave, or other lawful cause. 50 U.S.C. 3911(2). The term "military service" also includes the following: State active duty as a member of the North Carolina National Guard under an order of the Governor pursuant to Chapter 127A of the General Statutes, for a period of more than 30 consecutive days; service as a member of the National Guard of another state who resides in North Carolina and is under an order of the governor of that state that is similar to State active duty, for a period of more than 30 consecutive days. G.S. 127B-27(3) and G.S. 127B-27(4).*

I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct.

Date	Signature Of Declarant	Name Of Declarant (type or print)
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NOTE TO COURT: *Do not proceed to enter judgment in a non-criminal case in which the defendant has not made an appearance until a Servicemembers Civil Relief Act affidavit or declaration (whether on this form or not) has been filed, and if it appears that the defendant is in military service, do not proceed to enter judgment until such time that you have appointed an attorney to represent him or her.*

(Over)

Information About Servicemembers Civil Relief Act Affidavits And Declarations

1. Plaintiff to file affidavit/declaration

In any civil action or proceeding, including any child custody proceeding, in which the defendant does not make an appearance, the court, before entering judgment for the plaintiff, shall require the plaintiff to file with the court an affidavit—

- (A) stating whether or not the defendant is in military service and showing necessary facts to support the affidavit; or
- (B) if the plaintiff is unable to determine whether or not the defendant is in military service, stating that the plaintiff is unable to determine whether or not the defendant is in military service.

50 U.S.C. 3931(b)(1).

2. Appointment of attorney to represent defendant in military service

If in a civil action or proceeding in which the defendant does not make an appearance it appears that the defendant is in military service, the court may not enter a judgment until after the court appoints an attorney to represent the defendant. If an attorney appointed to represent a service member cannot locate the service member, actions by the attorney in the case shall not waive any defense of the service member or otherwise bind the service member. 50 U.S.C. 3931(b)(2).

State funds are not available to pay attorneys appointed pursuant to the Servicemembers Civil Relief Act. To comply with the federal Violence Against Women Act and in consideration of G.S. 50B-2(a), 50C-2(b), and 50D-2(b), plaintiffs in Chapter 50B, Chapter 50C, and Chapter 50D proceedings should not be required to pay the costs of attorneys appointed pursuant to the Servicemembers Civil Relief Act. Plaintiffs in other types of actions and proceedings may be required to pay the costs of attorneys appointed pursuant to the Servicemembers Civil Relief Act. The allowance or disallowance of the ordering of costs will require a case-specific analysis.

3. Defendant's military status not ascertained by affidavit/declaration

If based upon the affidavits filed in such an action, the court is unable to determine whether the defendant is in military service, the court, before entering judgment, may require the plaintiff to file a bond in an amount approved by the court. If the defendant is later found to be in military service, the bond shall be available to indemnify the defendant against any loss or damage the defendant may suffer by reason of any judgment for the plaintiff against the defendant, should the judgment be set aside in whole or in part. The bond shall remain in effect until expiration of the time for appeal and setting aside of a judgment under applicable Federal or State law or regulation or under any applicable ordinance of a political subdivision of a State. The court may issue such orders or enter such judgments as the court determines necessary to protect the rights of the defendant under this Act. 50 U.S.C. 3931(b)(3).

4. Satisfaction of requirement for affidavit/declaration

The requirement for an affidavit above may be satisfied by a statement, declaration, verification, or certificate, in writing, subscribed and certified or declared to be true under penalty of perjury. 50 U.S.C. 3931(b)(4). The presiding judicial official will determine whether the submitted affidavit is sufficient.

5. Penalty for making or using false affidavit/declaration

A person who makes or uses an affidavit permitted under 50 U.S.C. 3931(b) (or a statement, declaration, verification, or certificate as authorized under 50 U.S.C. 3931(b)(4)) knowing it to be false, shall be fined as provided in title 18, United States Code, or imprisoned for not more than one year, or both. 50 U.S.C. 3931(c).

DOMESTIC VIOLENCE (§50-B) INFORMATION SHEET

Please PRINT clearly and fill out completely and accurately:

Plaintiff's (your) Name: _____

County where Plaintiff Resides: _____

Defendant's (other party) Name: _____

County where Defendant Resides: _____

County here alleged incident(s) occurred: _____

Have you (Plaintiff) EVER filed a Domestic Violence Protective Order (§50-B) complaint against this Defendant? YES NO
If yes, in what county and state was this complaint filed? _____

Has this Defendant EVER filed a Domestic Violence Protective Order (§50-B) complaint against you? YES NO
If yes, in what county and state was this complaint filed? _____

Has this Defendant EVER been charged with any crimes for any incidents involving you? YES NO
If yes, in what county, state and year were charges brought? _____

Have you EVER been charged with any crimes for any incidents involving this Defendant? YES NO
If yes, in what county, state and year were charges brought? _____

Have you and/or this Defendant filed ANY civil actions (paperwork filed in the Clerk's office) in Family/Domestic Court for **custody of children, child support, alimony, and/or equitable distribution of property**? YES NO
If yes:
What claims have been filed? _____

In what county and state were the complaints filed? _____

What is the name and telephone number of your attorney? _____

What is the name and telephone number of Defendant's attorney? _____

Who is your Domestic/Family Court Judge? Bell Ratledge McCullers Young Worley Other: _____

Complete this section only if you are requesting temporary custody of your children:

Has this Defendant been charged with any crimes for any incidents involving your minor children? YES NO
If yes, in what county and state were charges brought? _____

Have you been charged with any crimes for any incidents involving your minor children? YES NO
If yes, in what county and state were charges brought? _____

Has the Department of Human Services investigated any claims concerning your minor children? YES NO
If yes, in what county and state? _____

Do you have a current/active case with Child Protective Services (CPS)? YES NO
If yes, what is the name of your case worker? _____

FOR COURT USE ONLY

Domestic cases involving both parties and assigned Family Court Judge:

Criminal cases involving both parties:

STATE OF NORTH CAROLINA

File No.

_____ County

In The General Court Of Justice
District Court Division

Name Of Plaintiff

Address

City, State, Zip

**CIVIL SUMMONS
DOMESTIC VIOLENCE**

ALIAS AND PLURIES SUMMONS

G.S. 50B-2(a)

VERSUS

Name Of Defendant

Date Original Summons Issued

Date(s) Subsequent Summons(es) Issued

To The Defendant Named Below:

Name And Address Of Defendant

A Civil Action Has Been Commenced Against You!

You are notified to appear and answer the complaint of the plaintiff as follows:

1. Serve a copy of your written answer to the complaint upon the plaintiff or plaintiff's attorney within ten (10) days after you have been served. You may serve your answer by delivering a copy to the plaintiff or by mailing it to the plaintiff's last known address; and
2. File the original of the written answer with the Clerk of Superior Court of the county named above.

If you fail to answer the complaint, the plaintiff will apply to the Court for the relief demanded in the complaint.

Name And Address Of Plaintiff's Attorney (if none, Address Of Plaintiff)

Date Issued

Time AM PM

Signature

Deputy CSC Assistant CSC Clerk Of Superior Court Designated Magistrate

ENDORSEMENT

This Summons was originally issued on the date indicated above and returned not served. At the request of the plaintiff, the time within which this Summons must be served is extended sixty (60) days.

Date Of Endorsement

Time AM PM

Signature

Deputy CSC Assistant CSC Clerk Of Superior Court

(Over)

RETURN OF SERVICE

I certify that this Summons and a copy of the complaint and a copy of the ex parte order were received and served as follows:

DEFENDANT

<i>Date Served</i>	<i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM	<i>Name Of Defendant</i>
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- By delivering to the defendant named above a copy of the summons and complaint.
- By leaving a copy of the summons and complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing within.

Name And Address Of Person With Whom Copies Left

<input type="checkbox"/> Acceptance of service. Summons and complaint <input type="checkbox"/> and ex parte order received by: <input type="checkbox"/> Defendant. <input type="checkbox"/> Other: <small>(type or print name)</small>	<i>Date Accepted</i>	<i>Signature</i>
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Other manner of service *(specify)*

Defendant WAS NOT served for the following reason:

<i>Service Fee Paid</i> \$	<i>Signature Of Deputy Sheriff Making Return</i>
<i>Date Received</i>	<i>Name Of Sheriff (type or print)</i>
<i>Date Of Return</i>	<i>County Of Sheriff</i>

Victim Information

(ALL INFORMATION IS CONFIDENTIAL)
PLEASE FILL OUT (ALL THE FOLLOWING INFORMATION)

DATE: _____

TIME: _____

Plaintiff
Name _____ Race _____ Gender _____
Date of Birth _____
Address _____
Telephone: Home _____ Work _____ Cell _____

Defendant
Name _____ Race _____ Gender _____
Date of Birth _____
Address _____
Def. Business Address: _____
Telephone: Home _____ Work _____ Cell _____
Vehicle: _____
Year _____ Make _____ Model _____ Color _____

If you have school age child/children please list name, date of birth and school they attend

<u>Child's Name</u>	<u>Date of Birth</u>	<u>Name of School</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____