

**State of Washington
King County District Court**

No.

Petitioner (Protected Person)

DOB

vs.

Respondent (Restrained Person)

DOB

**Petition for Renewal of Sexual
Assault Protection Order and Notice
of Hearing
(PT/NTHG)**

Clerk's Action Required

1. The Sexual Assault Protection Order dated _____ will expire on _____ [date].

2. Petitioner requests renewal of the Sexual Assault Protection Order because: _____

3. Petitioner requests the following relief in the order:

1. **Restrain** respondent from having any contact with petitioner, including but not limited to telephone calls, mail, e-mail, fax and written notes, directly, indirectly, or through third parties regardless of whether those third parties know of the order.

2. **Exclude** respondent from the following places:

- Petitioner's residence
- Petitioner's workplace
- Petitioner's school
- Petitioner's day care
- Other:

<input type="checkbox"/> 3. Prohibit respondent from knowingly coming within, or knowingly remaining within _____ [distance] of: <input type="checkbox"/> Petitioner's residence <input type="checkbox"/> Petitioner's workplace <input type="checkbox"/> Petitioner's school <input type="checkbox"/> Petitioner's day care <input type="checkbox"/> Other:
<input type="checkbox"/> 4. Restrain respondent from attending _____ school at _____ [address] attended by the petitioner and Order respondent to transfer to a different school. (If this relief is granted, respondent or respondent's parents or legal guardians will be responsible for transportation and all other costs associated with change of school.)
<input type="checkbox"/> 5. Other:

4. There has been no material change in relevant circumstances since entry of the Sexual Assault Protection Order.

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Dated: _____ at _____, Washington.

Signature of Petitioner

Print or Type Name

<p>Notice of Hearing: To the Respondent:</p> <p>A hearing will be held on _____, at _____ a.m./p.m. at _____ [location] to determine whether the requested renewal of the Sexual Assault Protection Order should be granted.</p> <p>If You do not Appear, the Court May Enter an Order Granting the Requested Renewal.</p> <p style="text-align: center;">County Clerk</p> <p>Dated: _____</p> <p style="text-align: right;">By: _____, Deputy Clerk</p>

This document must be served on the other party, and a Return of Service must be filed with the court clerk at or before the hearing.