

CAUSE No: _____

_____	§	IN THE JUSTICE COURT
Applicant	§	
	§	
vs.	§	PRECINCT _____
	§	
_____	§	
Defendant	§	LAVACA COUNTY, TEXAS
	§	SITTING AS MAGISTRATE

APPLICATION FOR MAGISTRATE’S EMERGENCY PROTECTIVE ORDER
 Tex. CODE CRIM. PROC. ANN. Art 17.292

_____ (VICTIM/PEACE OFFICER) Applicant, filed application
 on the _____ day of _____, _____, requesting the court to issue a Magistrate’s
 Emergency Order for the benefit and protection of:

VICTIM’S Name: _____ D.O.B.: _____ SS #: _____

Residence: _____ Place of Employment: _____

ARE THERE CHILDREN INVOLVED? _____ Yes _____ No

Child’s Name: _____ D.O.B.: _____ SS #: _____

Address of Residence: _____

Address & Name of Care giver/Daycare/School: _____

Child’s Name: _____ D.O.B.: _____ SS #: _____

Address of Residence: _____

Address & Name of Care giver/Daycare/School: _____

Child’s Name: _____ D.O.B.: _____ SS #: _____

Address of Residence: _____

Address & Name of Care giver/Daycare/School: _____

Child’s Name: _____ D.O.B.: _____ SS #: _____

Address of Residence: _____

Address & Name of Care giver/Daycare/School: _____

Name & Description of household dog(s): _____

Does the victim and defendant reside at the same location? (YES) (NO)

Based on the information in the attached Affidavit, there is a clear and present danger of family violence that will cause the Applicant, children, or other adults named on page 1 of this Application, immediate and irreparable injury, loss and damage, for which there is no adequate remedy at law. Applicant asks the Court to issue a Temporary Ex Parte Protective Order immediately without bond, notice or hearing.

RELIEF REQUESTED BY APPLICANT

Applicant asks the court to grant the court's protection by prohibiting Defendant from (check all that apply):

- Committing family violence, as defined in § 71.004, Texas Family Code, against persons named above or an assault on the person seeking protection; AND/OR
- Committing an act in furtherance of stalking, an offense under § 42.072, Texas Penal Code, against those persons named above; AND/OR
- Communicating-
 - Directly with a member of the family or household or with the person seeking protection in a threatening or harassing manner; AND/OR
 - A threat through any person to a member of the family or household or to the person seeking protection; AND/OR
- Going to or near:
 - Any and all dogs at residence
 - The residence, place of employment, or business of a member of the family or household or of the person seeking protection; AND/OR
 - The residence, child care facility, or school where a child protected under the order resides or attends; AND
- Possessing a firearm, unless the person is a peace officer as defined by §1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision; AND
- Suspending Defendant's handgun license.
- Additionally, Applicant asks the court to find that, for the safety of the persons listed herein, there is good cause to keep their addresses confidential.
- Additionally, Applicant asks the Court to order the Defendant to pay fees for service of process, all other fees and costs of Court, and reasonable attorneys' fees, if applicable.
- Additionally, Applicant asks the Court to order the Defendant not damage, transfer, encumber, or otherwise dispose of any property jointly owned or leased by the parties, except in the ordinary course of business or for reasonable and necessary living expenses, including, but not

limited to , removing or disabling any vehicle owned or possessed by the Applicant or jointly owned or possessed by the parties (whether so titled or not).

_____ Additionally, Applicant asks the Court to order the Defendant not to remove the children from the jurisdiction of the Court.

_____ Require the Defendant to complete a battering intervention and prevention program; or if no such program is available, counseling with a social worker, family service agency, physician, psychologist, licensed therapist, or licensed professional counselor; and pay all costs for the counseling or treatment ordered.

Applicant's signature

Date: _____