# STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY

### **COMPLAINT FOR EXTREME RISK PROTECTION ORDER,** ADULT RESPONDENT

v

CASE NO. and JUDGE

#### Court address

Court telephone no.

Petitioner's name, telephone no., and email address				
Age	Race	Sex		
Petitioner must complete and file form CC 450, <i>Confidential Information</i> , with this petition.				

Respondent's name, address, and telephone no.	Age

# **Background Information - Petitioner and Respondent**

In this section,	provide the	following	information	about the	e petitioner	and	respondent.	The person	filing the o	complaint is
the petitioner a	nd the respo	ndent is th	ne person th	at the pe	titioner is as	sking	be subject to	an extreme	e risk prote	ction order.
4 The second station of										

1. The petitioner: (mark all that apply) is the current spouse former spouse of the respondent.

has a child in common with the respondent.

has had a dating relationship with the respondent.

lives previously lived in the same household with the respondent.

is a family member of the respondent. (Note: "family member" means parent, child, sibling, grandparent, grandchild, uncle, aunt, first cousin.)

 $\Box$  is a guardian of the respondent under MCL 700.1104.

 $\Box$  is a law enforcement officer (as defined in MCL 691.1803).

 $\Box$  is a health care provider (as defined in MCL 691.1803).

- $\Box$  2. I am the next friend and am filing on behalf of the petitioner.
- 3. I know the respondent is one of the following:
  - a. an individual who is required to carry a pistol as a condition of their employment and is issued a license to carry a concealed pistol.
  - b. a police officer licensed or certified under the Michigan commission on law enforcement standards act, 1964 PA 203, MCL 28.601 to 28.615.
  - $\Box$  c. a sheriff or deputy sheriff.
  - d. a member of the department of state police.
  - e. a local corrections officer.
  - f. an employee of the department of corrections.
  - g. a federal law enforcement officer who carries a pistol during the normal course of the officer's employment.

☐ h. an officer of the Federal Bureau of Prisons.

The respondent's employer is: Provide name of employer or specific law enforcement department or agency

4. Provide as much information about the respondent as possible below:

Full name of resp	oondent (type or p	print)				
Height	Weight	Race	Sex	Hair color	Eye color	
Other identifying	information					

#### **Pending Court Actions**

In this section, provide information regarding any pending or resolved court actions involving you and the respondent, and whether an extreme risk protection order action involving the respondent has been started in another jurisdiction.

5. I do not know whether an extreme risk protection action involving the respondent has been commenced in another jurisdiction.

 $\Box$  An extreme risk protection action involving the respondent has been commenced in  $\frac{1}{Name \text{ of county}}$ 

6. a.	There	🗌 are	are		other pending actions in this or any other court affecting the parties.				
	Case num	nber	Na	me of court, county, and state or provi	vince Name of judge				
			_						
b.	b. There $\Box$ are $\Box$ are not orders/judgments entered by this or any other court affecting the parties.								
	Case num	nber	Na	me of court, county, and state or provi	vince Name of judge				

### Request for an Extreme Risk Protection Order

In this section, you will be providing information to the court to support the request for an extreme risk protection order. The information provided will help the court in deciding whether or not to grant your request.

7. I request the court issue an extreme risk protection order against the respondent to prohibit the respondent from purchasing or possessing a firearm and to require the respondent to surrender any concealed weapons license or any valid unused license to purchase a firearm. An extreme risk protection order is necessary because the respondent can reasonably be expected within the near future to intentionally or unintentionally seriously physically injure himself, herself, or another individual by possessing a firearm, and has engaged in an act or acts or made significant threats that are substantially supportive of the expectation. The detailed facts that support this statement are: (use additional sheets if necessary)

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# Ex Parte Order

In addition to requesting an order, you can ask the court to issue the order immediately, before the respondent gets notice about the petition or before any hearing. This is called an "ex parte" order. If an ex parte order is not requested, the court will not enter an order until after a hearing is held on the petition.

8. I **am not** requesting an ex parte order.

# OR

I am requesting that the court issue an ex parte extreme risk protection order against the respondent. An ex parte order is necessary because: (check all that apply)

 $\Box$  immediate and irreparable injury, loss, or damage will result from the delay required to give notice.

notice itself will precipitate adverse action before an extreme risk protection order can be issued.

The detailed facts that support this statement are: (use additional sheets if necessary)

### Firearms

In this subsection, state whether you know or believe the respondent possesses firearms. Identify any firearms you know or believe the respondent owns or possesses, including any information that would assist a law enforcement officer in locating the firearms. Examples of firearms include, but are not limited to rifles, shotguns, pistols, and handguns. Use additional sheets if necessary. If you don't know a particular piece of information, leave the space blank.

9.  $\Box$  The respondent does not own or possess firearms.

□ I am unsure whether the respondent owns or possesses firearms.

□ I know or believe that the respondent owns or possesses firearms. Information regarding the firearms is as follows:

Type of firearm	Manufacturer	Model	Caliber/gauge	Location (if known)

Provide any other information that would help a law enforcement officer to find the firearm(s).

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- 10. Additional information: If you have any information about any of the following items, please provide it below. You may use additional pages if necessary. If the answer to any question is "yes," please provide a detailed explanation.
  - a. Does the respondent have any history of use, attempted use, or threatened use of physical force against another individual, or against themself? Include information about any violence or threat of violence, regardless of whether a firearm was involved.
  - b. Is there any evidence of the respondent having a serious mental illness or a serious emotional disturbance, as defined in MCL 330.1100d, that makes the respondent dangerous to other individuals or to themself?
  - c. Have any of the following orders ever been entered against the respondent: extreme risk protection order, personal protection order, restraining order, pretrial release order, probation or parole order, any other type of order intended to prevent the respondent from certain activity?
  - d. Has the respondent ever violated an extreme risk protection order or personal protection order?
  - e. Does the respondent have any prior criminal convictions or adjudications as either an adult or juvenile?
  - f. Does the respondent have any criminal cases or petitions currently pending against them?
  - g. Is there any evidence of recent unlawful use of controlled substances by the respondent?
  - h. Is there any evidence of recent abuse of alcohol by the respondent?
  - i. Has the respondent previously unlawfully possessed, used, displayed, or brandished a deadly weapon?

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- j. Is there any evidence that the respondent has obtained, or attempted to obtain a deadly weapon or ammunition within the past 180 days?
- k. Is there any other reliable information the court should consider?

I declare under the penalties of perjury that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date

Petitioner's/Next friend's signature

Name (type or print)

Attorney signature (if applicable)

Attorney name (type or print)

Address

City, state, zip

Telephone no.

Bar no.