

# NOTICE TO RESPONDENT AND REQUEST FOR HEARING

## **THIS FORM MUST BE ATTACHED TO ALL COPIES OF THE *ORDER FOR LESS RESTRICTIVE TERMS***

**TO RESPONDENT:** AN ORDER HAS BEEN ISSUED THAT CHANGES THE TERMS OF THE *RESTRAINING ORDER* ALREADY IN EFFECT. THE CHANGES ARE IN EFFECT NOW.

The changes make the *Restraining Order* less restrictive on you. If you disagree with any changes made to the *Restraining Order*, complete the attached *Request for Hearing* form. File it with the court that issued the order at the address on the bottom of this page within 30 days after you receive this *Notice*.

- **Note:** if you request a hearing, only the changes the Petitioner requested will be considered. You *cannot* ask that the *Restraining Order* be ended.

## **FIREARMS PROHIBITIONS APPLY!**

### **Criminal Penalties for Firearms Possession** (ORS 166.255(1)(a))

You will be subject to criminal penalties for possessing firearms or ammunition effective the earliest of:

- (1) 30 days after you were served with the *Order*

Or, if you request a hearing:

- (2) the date of the hearing if the *Order* is not dismissed or
- (3) the date of the hearing if you fail to appear at the hearing or
- (4) the date you withdraw your request for a hearing

### **Contempt Penalties for Firearms Possession**

If the firearms prohibition in Section 18 of the *Restraining Order* is initialed by the judge:

- it is immediately unlawful for you to possess or purchase a firearm, including a rifle, pistol, or revolver, and ammunition under ORS 107.718(1)(h)
- you are subject to contempt of court for violation of the firearms prohibition as soon as you are served with or become aware of the *Order*
- criminal penalties may also apply

You may also be prohibited from:

- Serving in the Armed Forces of the United States or being employed in law enforcement. If you have any questions about how these laws apply to you, talk to a lawyer.
- Traveling across state lines or tribal land lines with the intent to violate this Order and then violating this order
- Causing Petitioner to cross state lines or tribal land lines for the purpose of violating the order

### **Other Laws May Also Apply To You**

Whether or not a *Restraining Order* is in effect, federal law may prohibit you from:

- Traveling across state lines or tribal land lines with the intent to injure the Petitioner and then intentionally committing a crime of violence causing bodily injury to the Petitioner
- Causing Petitioner to travel across state lines or tribal land lines if your intent is to cause bodily injury to Petitioner or if the travel results in you causing bodily injury to Petitioner.

**IF YOU WANT A HEARING, MAIL OR DELIVER THE *REQUEST FOR HEARING* FORM TO (*address of court*):** \_\_\_\_\_

**REQUEST FOR HEARING**

*(To Be Completed By Respondent Only)*

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF \_\_\_\_\_

Case No: \_\_\_\_\_

\_\_\_\_\_  
Petitioner

v.

\_\_\_\_\_  
Respondent

*(Name of person restrained)*

**REQUEST FOR HEARING  
ON ORDER FOR LESS  
RESTRICTIVE TERMS**

*(Family Abuse Prevention Act)*

**I am the Respondent.** I request a hearing to oppose the changes to the *Restraining Order* as follows:

I oppose: *(check all that apply)*

- allowing me to move back into the house
- allowing access to specific locations
- allowing contact with the Petitioner

I understand that only Petitioner’s requested changes will be considered at this hearing, and that the judge does not have the authority to end the order at my request. I understand that all unchanged terms of the *Restraining Order* remain in effect.

- I will need \_\_\_\_\_ language interpretation services at the hearing
- I will need American’s with Disabilities Act accommodations at the hearing

Submitted by:  Respondent  Attorney for Respondent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Email

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Contact Address

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
Contact Phone

*Attorney for Respondent:*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
OSB#

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
Phone