

## NOTICE TO RESPONDENT AND REQUEST FOR HEARING

**TO RESPONDENT: A COURT HAS ISSUED AN *EXTREME RISK PROTECTION ORDER* THAT AFFECTS YOUR RIGHTS. THE ORDER IS NOW IN EFFECT FOR ONE YEAR.**

You have the right to contest (oppose) the Order within **30 days** as set out below. It may be helpful to have a lawyer represent you at the hearing but it is not required.

---

---

If you oppose the Order, complete the attached “*Request for Hearing*” form. The request must be filed with the court **within 30 days** after you received the Order. You must include your address and telephone number. At the hearing, a judge will decide whether the Order should remain in effect or be dismissed. **If you do not go to the hearing, the restraining order may remain in effect.**

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

- The hearing will be held within **21 days** after you file your request

If you do not request a hearing within 30 days, the Protection Order will remain in effect as issued

### **Effect of the protection order**

Read the Order for details about what the court has ordered you to do

### **When the order ends or is cancelled by the court (terminated)**

After the Order expires or is terminated, you can reclaim your weapons. If you surrendered a concealed handgun license to a law enforcement agency, request return of the license directly from the agency.

### **Violation of the Protection Order**

Violation of this Order is a Class A Misdemeanor punishable by up to 364 days in jail and fines up to \$6250. You will also be prohibited from possessing, owning, receiving, or using (or attempting to) any firearms for 5 years after the Order expires.

---

---

## **TERMINATION OF EXTREME RISK PROTECTION ORDER**

You can file a request to terminate (end) the *Order* one time during the effective period (1 year from the date the *Order* was issued). If the *Order* is renewed, you can file for termination one time during each 1-year effective period. Go to <http://www.courts.oregon.gov/forms> to get the forms to file for termination.

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

**In the Matter of:** \_\_\_\_\_

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

**REQUEST FOR HEARING**

\_\_\_\_\_  
Respondent

(Extreme Risk Protection Order)

➤ I need an interpreter:  Spanish  Russian  other: \_\_\_\_\_

I am the Respondent. I request a hearing in this case. The *Extreme Risk Protection Order* was issued **less than 30 days** ago.

I  will  will not be represented by an attorney at the hearing

➤ Name and bar number of the attorney (if known): \_\_\_\_\_  
\_\_\_\_\_

I will need Americans with Disabilities Act accommodations at the hearing. I will submit a completed request form at least 4 days before the hearing. (Request forms are available at [www.courts.oregon.gov/forms](http://www.courts.oregon.gov/forms) or from your local courthouse.)

Submitted by:  Respondent  Attorney for Respondent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Phone

\_\_\_\_\_  
*Attorney for Respondent:*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

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

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

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Phone