

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 ASL 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 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