

RENEWING A SEXUAL ABUSE PROTECTIVE ORDER

INSTRUCTIONS

Procedures vary from court to court. Check with your local court for filing instructions.

CAN I RENEW A SEXUAL ABUSE PROTECTIVE ORDER?

You may ask the court to renew the Sexual Abuse Protective Order (SAPO) if you are still in reasonable fear for your safety.

HOW DO I ASK FOR MY SEXUAL ABUSE PROTECTIVE ORDER TO BE RENEWED?

If you want to renew the SAPO, fill out the forms in this packet and submit them to the court where you obtained your original SAPO.

WHEN CAN I ASK FOR MY SEXUAL ABUSE PROTECTIVE ORDER TO BE RENEWED?

File your request with the court sometime **before** the original Order ends. Remember, the original SAPO lasts for 5 years unless one of the following applies:

- If you are under 18 years of age at the time the Order is entered, then the order lasts for 5 years or until the January 1st following your 18th birthday, whichever occurs later, or
- The court enters a permanent Order, or
- The Order is renewed, modified, or terminated.

The Order can be renewed for five years at a time if the judge finds it is reasonable for a person in your situation to fear for their physical safety if the Order is not renewed. **To renew the Order, you must file the court paperwork before the Order ends.**

You may lose your chance to apply if you do not file before the date the Order ends.

WHAT HAPPENS NEXT?

After you file your renewal forms, the judge will decide if it is reasonable for a person in your situation to fear for their physical safety if the SAPO is not renewed. You do not have to prove that there has been any new abuse since the original Order was signed. You do have to explain why you want it renewed.

If the judge grants your renewal, court staff will make copies for you. You will need to have one of the copies hand-delivered to Respondent by a sheriff, a private process server, or any mentally competent person who is 18 or older, as long as the server lives in the state where the papers are served. You cannot serve the papers yourself. The server is required to complete and file with the court a certificate of service. There is a form in the packet, but some servers use their own forms. Talk to the court clerk about ways to get Respondent served.

The Respondent has 30 days from the date of service to ask for a hearing. If Respondent does not ask for a hearing, the renewed SAPO will stay in effect.

If Respondent asks for a hearing, the only issue the judge will consider is whether to continue or dismiss the SAPO, unless Respondent requests other issues in the hearing request form, and you agree, or Respondent has filed a request to modify the Order.

If Respondent asks for a hearing, it will be held within 21 days after receiving the hearing request. The court will mail you a notice of the hearing date and time or may notify you by phone. It is very important for you to give the court a reliable address and phone number where you can be contacted. If you do not appear at the hearing, your SAPO may be dismissed. **Be sure the court always has your current contact addresses and contact phone numbers so you get notice of any hearing.** Use safe contact addresses and contact phone numbers.

You may ask in writing, ahead of time, to appear by telephone or other method, such as video-conferencing.

DO I NEED A LAWYER?

If you have questions about how the law works or what it means, you may need to talk to a lawyer. You are not required to have a lawyer to renew the SAPO, and the court will not appoint a lawyer for you, but you can have a lawyer represent or help you if you wish.

If the Respondent asks for a hearing to modify or terminate the Order, and is represented by a lawyer, you can ask the judge to extend the date of the hearing for up to five days so that you may get a lawyer. The law does not authorize the judge to appoint an attorney for you.

If you need help finding a lawyer, call the Oregon State Bar's Lawyer Referral Service at 503.684.3763 or 800.452.7636. If you believe you cannot afford a lawyer, ask court staff if your area has a legal services (legal aid) program that might help you. You also can go to: www.oregonlawhelp.org.

WHAT IF I NEED AN ACCOMMODATION OR AN INTERPRETER?

If you have a disability and need an accommodation, or you need a foreign language interpreter, you must tell the court as soon as possible, but at least four days before your hearing. Tell the clerk that you have a disability and what type of assistance you need or prefer, or which language you speak.

IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF _____

Petitioner

Case No: _____

Parent/Guardian of Minor Petitioner
(use full names)

**PETITION TO RENEW SEXUAL
ABUSE PROTECTIVE ORDER**

v.

Respondent
(full name of person restrained)

I am the Petitioner (if parent or guardian of minor petitioner, use the minor's information). I ask the court to renew the SAPO dated (date of original order): _____

I fear for my physical safety if the Sexual Abuse Protective Order (SAPO) is not renewed because: (You do not need to show new acts of sexual abuse since the original SAPO was issued. If there have been new acts, explain here.)

Additional page attached labeled "Paragraph 1: Reason for Renewal"

I want the renewed SAPO to be effective:

- for a period of five years or
 permanently because (check all that apply):
 Respondent has been convicted of a sex crime against me
 passage of time or a change in circumstances will not lessen my fear because:

Reasons could include: Respondent has a history of sexual abuse or domestic violence; vulnerabilities that are not likely to change over time; you are under 18 and Respondent is related to you

I hereby declare that the above statements are true to the best of my knowledge and belief. I understand it is made for use as evidence in court and I am subject to penalty for perjury.

Submitted by Petitioner Parent or guardian for Petitioner Attorney for Petitioner

Date

Petitioner Signature (or parent/guardian of minor)

OSB # (attorneys only)

Name (printed)

Contact Address (use a SAFE address)

City, State, ZIP

Contact Phone (use a SAFE number)

IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF _____

_____	Petitioner	Case No: _____
_____	(Parent/Guardian of Minor Petitioner) (use full names)	NOTICE TO RESPONDENT/ REQUEST FOR HEARING
v.		(Sexual Abuse Protective Order)
_____	Respondent (full name of person restrained)	

THIS FORM MUST BE ATTACHED TO ALL COPIES OF THE SEXUAL ABUSE PROTECTIVE ORDER

TO RESPONDENT: A SEXUAL ABUSE PROTECTIVE ORDER HAS BEEN ISSUED BY THE COURT WHICH AFFECTS YOUR RIGHTS. THIS ORDER IS NOW IN EFFECT.

You have the right to contest this Sexual Abuse Protective Order as set out below.

If you want to contest (object to) any terms of this order you must complete the attached "REQUEST FOR HEARING" form (on Pages 3 and 4) and mail or deliver it to the address on the bottom of Page 2 below. A REQUEST FOR HEARING must be made within 30 days after you receive the Order. You must include your address and telephone number with your request for a hearing. The hearing will be held within 21 days. At the hearing, a judge will decide whether the order should be terminated, changed, or continued. **If you do not go to the hearing, the Protective Order may be upheld (continued) and all matters decided against you. If you do not ask for a hearing within 30 days after you receive this Order, this Protective Order will continue in effect as issued.**

Enforceability of the Sexual Abuse Protective Order

The Sexual Abuse Protective Order you have received is in effect and remains in effect until the court modifies (changes) it, terminates (ends) it, or until it expires. The order may also be renewed if the court finds that it is objectively reasonable for a person in Petitioner's situation to fear for their physical safety if the order is not renewed. If you are arrested for violating this order, the security amount (bail) is \$5,000 unless a different amount is ordered by the court.

This Sexual Abuse Protective Order, or any Order continuing or changing this Order, is enforceable in every county in Oregon. It is also enforceable in all 50 states, the District of Columbia, tribal lands, and territories of the United States.

Violation of the Sexual Abuse Protective Order

Violation of any part of this Sexual Abuse Protective Order, or any Order continuing or changing this Order, constitutes contempt of court, punishable by a fine of up to \$500 or one percent of your annual gross income, whichever is greater, or a jail term of up to six months, or both. Other consequences may also be imposed for contempt.

FIREARMS PROHIBITIONS MAY APPLY TO YOU

If the firearms prohibition in Paragraph 7 of the Order is initiated 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 163.765(1)(b)(E).
- you could be subject to criminal penalties or contempt of court for violation of the firearms prohibition as soon as you are served with the Order.

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

You could be subject to criminal penalties for possessing firearms or ammunition effective the earlier 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

FIREARMS NOTIFICATION: As a result of this Order, or any Order continuing or changing this Order, it may be unlawful for you to possess or purchase a firearm, including, a rifle, pistol, or revolver, or ammunition under federal, state, and local laws. 18 USC § 922(g)(8); ORS 166.250 to 166.270; and local law. This Order also may negatively affect your ability to serve in the Armed Forces of the United States or to be employed in law enforcement. If you have any questions about whether these laws make it illegal for you to possess or purchase a firearm, talk to a lawyer. (*42 USC §3796gg(4)(e) requires this notice*).

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 *Sexual Abuse Protective Order* is in effect, federal law may prohibit you from:

- Traveling across state lines or tribal land lines with the intent to injure Petitioner and then intentionally committing a crime of violence causing bodily injury to 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 the Petitioner.

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

REQUEST FOR HEARING
(To Be Completed By Respondent Only)

IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF _____

Petitioner

Case No: _____

(Parent/Guardian of Minor Petitioner)
(use full names)

REQUEST FOR HEARING
(Sexual Abuse Protective Order)

v.

Respondent
(full name of person restrained)

I am the Respondent in the above-referenced action, and I request the following:

1. I am requesting a hearing to contest (object to):

All of the order, **or**

Other: _____

2. I will will not be represented by an attorney at the hearing. The name and Bar Number of the attorney (if known) are: _____

3. I will will not need the following accommodations:

I will need _____ language interpretation services at the hearing

I will need Americans with Disabilities Act accommodations at the hearing

Notice of the time and place of the hearing can be mailed to me at the address below.

Date

Signature

Print Name, Respondent Attorney for Respondent OSB No. *(if applicable)*

Contact Address
Use a **Safe** Contact address

City, State, Zip

Contact Telephone Number
Use a **Safe** Contact number

IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF _____

Petitioner

Case No: _____

(Parent/Guardian of Minor Petitioner)
(use full names)

CERTIFICATE OF SERVICE
(Sexual Abuse Protective Order)

v.

Respondent
(full name of person restrained)

I, (name) _____, declare that I am a resident of the State of _____.

I am a competent person 18 years of age or older. I am not a party to or lawyer in this case, and not the employee of a party.

I certify that on (date) _____ at (time) _____ (am/pm), I served the Respondent named above by delivering the following documents in person to (address or location of service):_

I served true copies of the original (check all that apply):

- Protective Order to Prevent Sexual Abuse **or** Order Renewing Protective Order
- Petition for Order to Prevent Sexual Abuse **or** Petition to Renew Protective Order
- Notice to Respondent/Request for Hearing
- Instructions for Contesting a Sexual Abuse Protective Order (SAPO)
- Motion for Order to Show Cause re: Modifying Sexual Abuse Protective Order (SAPO) and Declaration in Support and Order to Show Cause
- Petitioner's Motion and Declaration for Less Restrictive Terms (Sexual Abuse Protective Order)
- Other (name all forms or documents served): _____

I hereby declare that the above statement is true to the best of my knowledge and belief. I understand it is made for use as evidence in court and I am subject to penalty for perjury.

Date

Signature of Server

Print Name

If person serving is NOT a sheriff or sheriff's deputy, address and phone number of server:

**NOTICE TO PETITIONERS RECEIVING ELECTRONIC NOTICE
ABOUT RESTRAINING ORDERS**

USE THIS FORM IF:

- You have already provided your email address or cell phone number to the sheriff's office to receive electronic notice when your *Protective Order* has been served or is about to expire

AND

- Your email address or cell phone number has changed

DO NOT FILE THIS FORM WITH THE COURT

The information below must be provided to the sheriff's office
in the county where the *Protective Order* was issued

If your contact address or phone number has changed, you must separately inform the court that issued the Order

A common time to use this form is when you are RENEWING or MODIFYING your protective order. This form can be used ANYTIME a protective order is in effect and you have changed your email address or cell phone number and still want to receive electronic notice from the sheriff's office about service or expiration.

**PETITIONER'S NOTICE TO SHERIFF'S OFFICE
OF CHANGE OF CONTACT INFORMATION**

Your Name: _____

Respondent's Name: _____

Court Case #: _____

County where *Order* Issued: _____

Your new cell phone number: _____

Cell Carrier (*AT&T, T-Mobile, Verizon. etc.*): _____

Your new email address: _____