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**FAMILY COURT OF THE STATE OF NEW YORK
COUNTY OF BROOME**

First Name MI Last Name
Petitioner

**FAMILY OFFENSE
PETITION**

-against-

Family File No: _____

First Name MI Last Name
Respondent

Docket No: _____

TO THE FAMILY COURT:

The undersigned Petitioner respectfully states that:

1.a. I reside at [specify address unless confidential]:¹ _____

b. The Respondent resides at [specify]: _____

2. The Respondent and I are related as follows [check applicable box(es)]:

- we are married we were married
 we have a child in common we are parent and child

we are related by blood or marriage [specify how]: _____

we are/ were in an intimate relationship (NOT casual, social, or business acquaintances)
[describe]: _____

- we live together we lived together in the past we never lived together

¹ If your health, safety or liberty or that of your child or children would be put at risk by disclosure of your address or other identifying information, you may apply to the Court for an address confidentiality order by submitting General Form GF-21. This form is available on-line at www.nycourts.gov.

3. The Respondent committed the following family offense(s) against me and/or my children, which constitute(s):

- | | |
|--|---|
| <input type="checkbox"/> Disorderly conduct | <input type="checkbox"/> Reckless endangerment |
| <input type="checkbox"/> Harassment in the first or second degree | <input type="checkbox"/> Stalking |
| <input type="checkbox"/> Aggravated harassment in the second degree | <input type="checkbox"/> Attempted assault |
| <input type="checkbox"/> Assault in the second or third degree | <input type="checkbox"/> Sexual misconduct |
| <input type="checkbox"/> Criminal mischief | <input type="checkbox"/> Forcible touching |
| <input type="checkbox"/> Sexual abuse in the second ² or third degree | <input type="checkbox"/> Criminal obstruction of breathing or circulation |
| <input type="checkbox"/> Strangulation | <input type="checkbox"/> Grand larceny in 3 rd or 4 th degree |
| <input type="checkbox"/> Identity theft in 1 st , 2 nd , or 3 rd degree | <input type="checkbox"/> Unlawful publication or dissemination of intimate images. |
| <input type="checkbox"/> Coercion in 2 nd degree (Penal Law §135.60(1), (2), or (3)) | |
| <input type="checkbox"/> Menacing in the second or third degree | |

Fully describe this incident. State the date, time, and place. Specify if anyone was injured (how seriously) and if any weapons were used. If there were earlier incidents as well, include them in paragraph #5. Use additional sheets where necessary: _____

4. I have have not filed a criminal complaint concerning these incident(s). If you have, please give status of that complaint: _____

5. The Respondent has has not acted in a way I consider dangerous or threatening to me, my children or any member of my family, in addition to the incident described in question 3. If the Respondent has, please describe (use additional sheets if necessary): _____

² Where victim is incapable of consent for reason other than being under age 17 (Penal Law §130.60(1)).

6. The Respondent was was not found to have violated an Order of Protection issued on behalf of me or members of my family or household. If so, please describe: _____

7. The Respondent does does not own or have access to guns. If so, describe: _____

8.a. The Respondent does does not have a gun license or pistol permit. If so, describe weapon: _____

b. The Respondent does does not have a gun license or permit application pending. If so, describe: _____

c. The Respondent does does not carry a gun on his or her job. If so, describe: _____

9.a. The Respondent has has not threatened me my child(ren) a household member with a gun or dangerous instrument. If so, describe: _____

b. There is is not a substantial risk that Respondent would use or threaten to use a firearm or dangerous instrument or object against me, my child(ren), or member of my household. If so, describe the reason for this belief: _____

10. The following court cases are pending between me and the Respondent. Specify court, docket or index number, nature of action, and status, if known. If none are pending state "none": _____

11. The Respondent has had has not had prior criminal convictions: If so, specify date, crime, sentence, and court, if known: _____

12.a. The following children live in my household:

<u>NAME</u>	<u>DOB</u>	<u>RELATION TO ME</u>	<u>RELATION TO RESP</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

b. The Respondent committed this family offense and the following child(ren) were negatively impacted. Please name child(ren) and how he/she/they were negatively impacted: _____

13.a. The following pets live in my house:

<u>NAME</u>	<u>TYPE OF PET</u>
_____	_____
_____	_____
_____	_____
_____	_____

b. The Respondent injured, tried, or threatened to injure pets in my household as follows [describe]: _____

14. I have have not made any previous application to any court or judge for the relief requested in this petition. If so, specify the court and the relief, if any, granted and the date of such relief: _____

WHEREFORE, Petitioner respectfully requests this Court to [check all which apply]:

- adjudge the Respondent to have committed the family offense(s) alleged;
- enter an order of protection, specifying conditions of behavior to be observed by the Respondent in accordance with Section 842 of the Family Court Act;
- enter a finding of aggravated circumstances;
- enter a temporary order of child support in accordance with Family Court Act §828(4);

Together with such other and further relief as to the Court may seem just and proper.

VERIFICATION

STATE OF NEW YORK:

COUNTY OF BROOME:

The Petitioner herein, being duly sworn, states that the foregoing petition is true to the Petitioner's own knowledge, except as to matters stated to be alleged on information and belief and as to those matters, the Petitioner believes them to be true.

Petitioner (print or type name)

Signature

Sworn to before me this

_____ day of _____, 20_____

(Deputy) Clerk of the Court
OR Notary Public

Attorney's Name, if applicable (print or type name)

Attorney's Signature