

IN THE CIRCUIT COURT OF THE SIXTEENTH JUDICIAL CIRCUIT
KENDALL COUNTY, ILLINOIS

Case No. _____

Plaintiff/Petitioner	Defendant/Respondent	File Stamp

VERIFIED PETITION FOR ORDER OF PROTECTION

(Fill in lines and check boxes as applicable)

Independent Proceeding Criminal Proceeding Matrimonial Other: _____

Now comes the Petitioner _____ on his/her own behalf or on behalf of _____, a minor child(ren), or on behalf of _____, an adult who cannot file a petition because of age, health, disability or inaccessibility on his/her own behalf, pursuant to the Illinois Domestic Violence Act (IDVA), and moves this Honorable Court to issue an Order of Protection in this cause and in support thereof states as follows:

ALLEGATIONS

THIS COURT HAS JURISDICTION OF THE SUBJECT MATTER AND OVER ALL NECESSARY PERSONS, WITH APPROPRIATE VENUE, BECAUSE:

A. Petitioner resides at _____
(Street Address, City)
in the County of _____ State of _____ ; OR

Petitioner resides at _____
(Street Address, City)
in the County of _____ State of _____ , and _____
the person on whose behalf this Petition is brought, resides at _____
(Street Address, City)
in the County of _____ State of _____ ; OR

Petitioner's address is omitted pursuant to statute. (Alternative address for notice of any motion is _____).

B. Respondent resides at _____
(Street Address, City)
in the County of _____ State of _____

C. Respondent stands in relationship to the Petitioner or alleged abused person/s as:

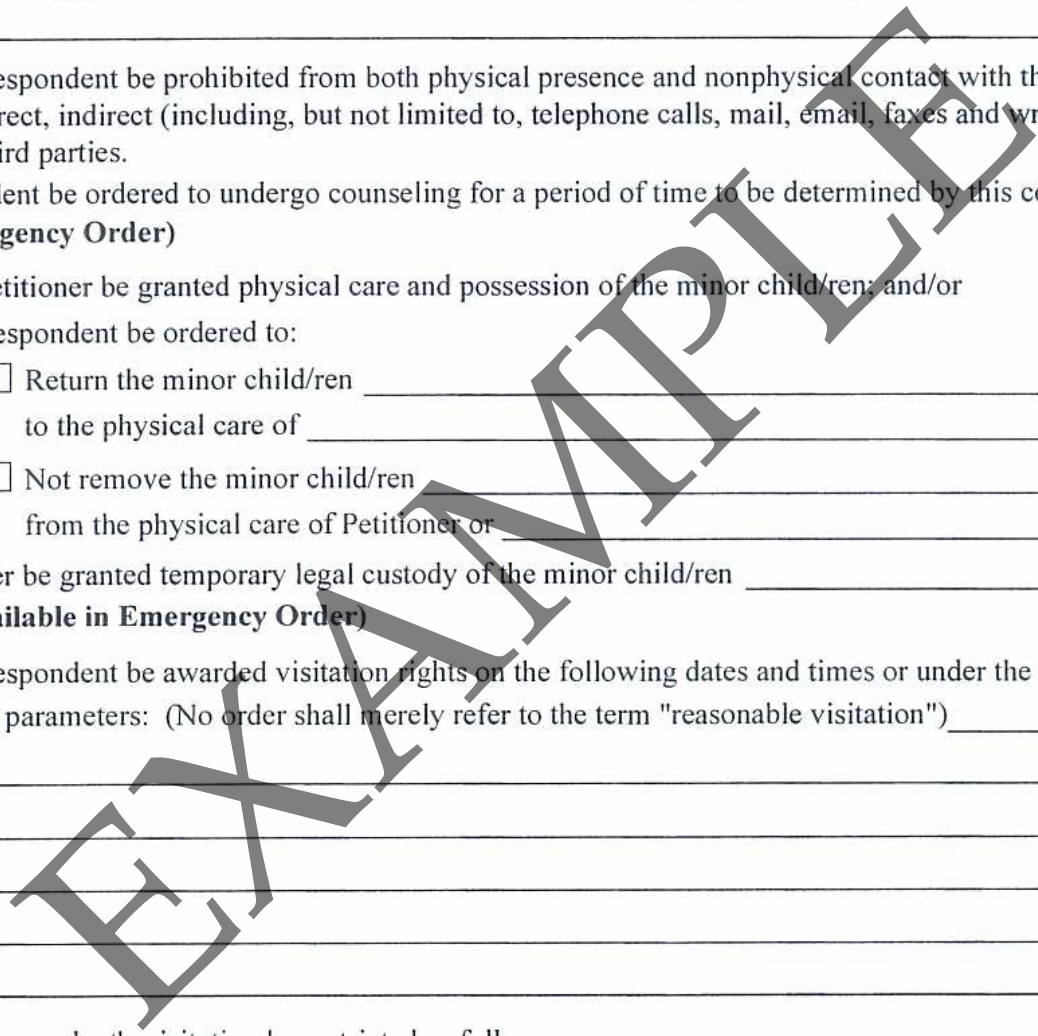
<input type="checkbox"/> Spouse;	<input type="checkbox"/> Former Spouse;	<input type="checkbox"/> Parent;
<input type="checkbox"/> Child(ren);	<input type="checkbox"/> Having or allegedly having a child in common;	<input type="checkbox"/> Stepchild(ren);
<input type="checkbox"/> Sharing or formerly sharing a common dwelling;	<input type="checkbox"/> Having or having had dating or engagement relationship;	<input type="checkbox"/> Other person related by blood or marriage;
<input type="checkbox"/> Sharing a blood relationship through child(ren);	<input type="checkbox"/> Personal assistant to person with disabilities or a person who has responsibility for a high-risk adult with disabilities;	

- 2. Petitioner be granted exclusive possession of the residence and Respondent be prohibited from entering or remaining at such premises: (address + county) _____
- 3. a. Respondent be ordered to stay away from Petitioner and other protected persons; and/or
 b. Respondent be prohibited from entering or remaining at _____
_____ while any Protected Person is present; and/or
- c. Respondent be allowed access to the residence on (date) _____ at (time) _____
in the presence of (name) _____ to remove items of clothing, personal adornments, medication used exclusively by the Respondent and other items, as follows:

- d. Respondent be prohibited from both physical presence and nonphysical contact with the petitioner whether direct, indirect (including, but not limited to, telephone calls, mail, email, faxes and writings), or through third parties.
- 4. Respondent be ordered to undergo counseling for a period of time to be determined by this court. **(Not available in Emergency Order)**
- 5. a. Petitioner be granted physical care and possession of the minor child/ren; and/or
 b. Respondent be ordered to:
 Return the minor child/ren _____
to the physical care of _____ ; and/or
 Not remove the minor child/ren _____
from the physical care of Petitioner or _____
- 6. Petitioner be granted temporary legal custody of the minor child/ren _____
(Not available in Emergency Order)
- 7. a. Respondent be awarded visitation rights on the following dates and times or under the following conditions or parameters: (No order shall merely refer to the term "reasonable visitation") _____

 b. Respondent's visitation be restricted as follows: _____

 c. Respondent's visitation be denied
- 8. Respondent be prohibited from removing the minor child(ren) from Illinois or concealing them within Illinois.
- 9. Respondent be ordered to appear in this Court with/without the child(ren) on a date certain. _____
- 10. Petitioner be granted exclusive temporary possession of the following personal property and the Respondent be ordered to deliver to Petitioner said property that is in Respondent's possession or control, to wit:



- 11. Respondent be ordered not to take, encumber, conceal, damage or otherwise dispose of any of the following real or personal property, to wit: _____

- 12. Respondent be ordered to pay temporary support for Petitioner and/or the minor child(ren) of the parties as follows: \$ _____ per _____, starting _____ payable:
 through the Clerk of the Circuit Court, or directly to Petitioner. **(Not available in Emergency Order)**
- 13. Respondent be ordered to pay \$ _____ respecting losses and expenses within the scope of Sec. 214(b)(13) of the IDVA to _____ on or before _____
(Not available in Emergency Order)
- 14. Respondent be prohibited from entering or remaining at household or residence located at _____ while under the influence of alcohol or drugs and so constituting a threat to the safety and well-being of the Protected Person.
- 14-5. Respondent be ordered to turn over any firearms in his/her possession to law enforcement.
(Not available in Emergency Order)
- 15. Respondent be denied access to school or any other records of the minor child(ren) and prohibited from inspecting, obtaining or attempting to inspect or obtain such records.
- 16. Respondent be ordered to pay \$ _____ to the following shelter _____ on or before _____
(Not available in Emergency Order)
- 17. Respondent be further enjoined as follows: _____

Signature of Attorney or State's Attorney

Signature of Petitioner

UNDER THE PENALTIES OF PERJURY AND AS PROVIDED BY LAW PURSUANT TO SECTION 1-109 OF THE CODE OF CIVIL PROCEDURE, THE UNDERSIGNED CERTIFIES THAT THE STATEMENTS SET FORTH IN THIS INSTRUMENT ARE TRUE AND CORRECT EXCEPT AS TO MATTERS THEREIN STATED TO BE INFORMATION AND BELIEF AND AS SUCH MATTERS THE UNDERSIGNED CERTIFIES AS AFORESAID THAT THE UNDERSIGNED VERILY BELIEVES THE SAME TO BE TRUE.

Signature of Petitioner

Atty./Pro Se: _____

Atty. Reg/Firm No.: _____

Address: _____

City/State/Zip: _____

Phone: _____