

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF

.....

Petitioner

Docket No.

-against-

FAMILY OFFENSE  
PETITION

Respondent

.....

TO THE FAMILY COURT:

The undersigned Petitioner respectfully states that:

- 1. a. I reside at [specify address unless confidential]:<sup>1</sup>
- b. The Respondent resides at [specify]:

- 2. a.  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 & child
  - we are related by blood or marriage [specify how]:
  - we are in an intimate relationship (NOT casual social or business acquaintances) [describe]:
  - we were in an intimate relationship (NOT casual social or business acquaintances) [describe]:

- b.  I am a peace officer.

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"/> Menacing in the second or third degree |
| <input type="checkbox"/> Harassment in the first or second degree                | <input type="checkbox"/> Reckless endangerment                  |
| <input type="checkbox"/> Aggravated harassment in the second degree              | <input type="checkbox"/> Stalking                               |
| <input type="checkbox"/> Assault in the second or third degree                   | <input type="checkbox"/> Attempted assault                      |
| <input type="checkbox"/> Criminal mischief                                       | <input type="checkbox"/> Sexual misconduct                      |
| <input type="checkbox"/> Sexual abuse in the second <sup>2</sup> or third degree | <input type="checkbox"/> Forcible touching                      |

<sup>1</sup> If your health or safety 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, which is available on-line at [www.nycourts.gov](http://www.nycourts.gov). See Family Court Act §154-b.

<sup>2</sup> Where victim is incapable of consent for reason other than being under age 17 [Penal Law §130.60(1)].

[Describe incident, state date, time and place of most recent incident, specify if anyone was injured (how seriously) and if any weapons were used. If there were earlier incidents as well, describe them in additional paragraphs. Use additional sheets where necessary]:

4. I  have  have not filed a criminal complaint concerning these incident(s) [If so, please indicate status].

5. [Check applicable box(es)]:

a. I have no children and there are no other children living in my home.

b. The following children live with me (include children who are not yours).  
Name      Date of Birth      Relationship to Me      Relationship to Respondent

c. The following children are mine but do not live with me.  
Name      Date of Birth      Lives With      Child's Relationship to Respondent

e. The Respondent committed family offenses against the above child or children as follows [describe including name(s) of child or children, nature of offense(s) and date(s)]:<sup>3</sup>

**[Check boxes and complete any of the following paragraphs 6-13 that apply to you. Skip any that do not apply to you.]**

6. The Respondent has 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, as follows [describe]:

7. The Respondent was found to have violated an Order of Protection issued on behalf of me or members of my family or household as follows [describe]:

8. The Respondent owns or has access to guns as follows [describe]:

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<sup>3</sup> Family offenses include the crimes of assault or attempted assault, aggravated harassment or harassment, disorderly conduct, menacing, reckless endangerment, stalking or criminal mischief.

9.  a. The Respondent has a gun license or pistol permit for the following gun(s) as follows [describe]:

b. The Respondent has a gun license or permit application pending as follows [describe]:

c. The Respondent carries a gun on his or her job as follows [describe]:

10.  a. The Respondent threatened [check applicable box(es)]:

me  my child or children [specify]:

a member or members of my household [specify]:

with a gun or dangerous instrument or object as follows [specify]:

b. There is 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 on the basis of the following facts and for the following reasons [describe]:

11. The following court cases are pending between me and the Respondent [specify court, docket or index number, nature of action and status, if known]:

12. The Respondent has the following criminal convictions [specify, including date, crime, sentence and court, if known]:

13. [Applicable where protection is sought for pet(s)]:

a. The following pets live in my house [specify name(s) and type(s)]:

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

14. I have not made any previous application to any court or judge for the relief requested in this petition, (except [specify the relief, if any, granted and the date of such relief; delete if inapplicable]: \_\_\_\_\_).

WHEREFORE, Petitioner respectfully requests this Court to:

- a. adjudge the Respondent to have committed the family offense(s) alleged;
- b. 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;
- c. enter a finding of aggravated circumstances [delete if inapplicable];
- d. enter a temporary order of child support in accordance with Family Court Act §828(4) [delete if inapplicable];
- e. order such other and further relief as to the Court seems just and proper.

Dated:

\_\_\_\_\_  
Petitioner: (print or type name) / Signature

\_\_\_\_\_  
Petitioner's Attorney, if any (print or type name) / Signature

\_\_\_\_\_  
Address and telephone number of Attorney, if any

VERIFICATION

STATE OF NEW YORK )  
 ) :ss.:  
COUNTY OF )

being duly sworn, says that (he)(she) is the Petitioner(s) in the above-named proceeding and that the foregoing petition is true to (his)(her) own knowledge, except as to matters stated to be alleged on information and belief and as to those matters (he)(she) believe(s) them to be true.

\_\_\_\_\_  
Petitioner: type or print name / Signature

Sworn to before me this  
day of , .

\_\_\_\_\_  
(Deputy)Clerk of the Court  
Notary Public