

## **Extreme Risk Protection Order (Initiative No. 1491.)**

A petition can be filed by a law enforcement agency, a law enforcement officer, or a person who is a family or household member of the respondent. Family or household members included.

- Persons related by blood, marriage, or adoption
- Dating partners
- Persons who have a child in common
- Persons who reside or have resided with the respondent within the past year
- Domestic partners
- Persons who have a biological or legal parent-child relationship, including stepparent and stepchildren, and grandparents and grandchildren.
- A person who is acting or has acted as the respondent's legal guardian

The petitioner must show that the respondent poses a significant danger of causing personal injury to self or others in the near future by having in his or her custody or control, purchasing, possessing, or receiving a firearm.

The court can order that the respondent surrender weapons but this type of protection order does not provide any protection for the petitioner.

### **Costs to petitioner**

- No fee for forms, filing, or certified copies.
- No fee required for service of documents on the respondent, if performed by law enforcement.

### **Filing:**

- Case shall be filed in the county where either the petitioner or respondent resides. If the petitioner is a law enforcement officer, the address is that of the law enforcement agency
- Filed as a stand-alone civil case.

### **Hearings:**

- The initial hearings for emergency ex parte temporary orders are held in daily on the Ex-Parte Calendar at 1:15. **Please bring your paperwork to the Clerk's office by noon.**
- Returning Hearings: Tuesday at 9:30am, the Court will set the hearing date
- Weapons surrender compliance hearing: Tuesday at 9:30am, the Court will set the hearing date.

SKAGIT COUNTY CLERK'S OFFICE  
205 WEST KINCAID ROOM 103  
MOUNT VERNON WA 98273  
(360) 416-1800

**SKAGIT COUNTY PROTECTION ORDERS PACKET INSTRUCTIONS**

1. Fill out these forms. Please print neatly with dark ink (not red). The Court must be able to read them clearly.
2. Correct Addresses on the Law Enforcement Information Sheet are very important.

**LAW ENFORCEMENT WILL NOT SERVE DOCUMENTS ON RESPONDENT  
WITHOUT AN ADDRESS.**

3. Please include the correct birth dates and correct spelling of names for all parties named.

**AGAIN, LAW ENFORCEMENT WILL NOT SERVE ANY DOCUMENTS  
WITHOUT THIS INFORMATION.**

4. Bring **completed forms** back to the clerk's office **Monday through Friday by 12:00 pm (noon)**. It is important to not be late, as court starts promptly at **1:15 pm**. ***You may have to return the next day if you are late.***

.....

**Fill out the following forms COMPLETELY:**

- 1) The Petition: Fill out all statement areas on the petition completely with as much information about what is happening and why you are petitioning for an order. This is what the court uses to determine if a temporary order is necessary.
- 2) LEI Sheet/Confidential Information: Correct addresses and birthdates if possible.

**Only the HEADING of the following documents need to be filled out:**

- 1) The Temporary Order of Protection (Judge/Commissioner will fill out the order)
- 2) The Order of Protection (Judge/Commissioner will fill out the order)

***If there is clear and convincing evidence that a party has used, displayed, or threatened to use a firearm or other dangerous weapon you may fill out the Motion For Surrender of Weapons Packet. The court will then consider issuing an order to have the respondent surrender their weapons to their local law enforcement agency.***

**PLEASE DO NOT FOLD, MUTILATE, TEAR, STAIN OR CRUMPLE THESE FORMS.**

Once court is done, you will be directed back down to the Clerk's Office to obtain copies. We will give you 3 certified copies of the temporary order. Keep a copy of the order with you at all times. Law enforcement will attempt to serve the respondent with the petition and temporary order. If respondent has not been served yet and is at your residence, please call 911 to have an officer come to your house. They can use one of your copies to serve on respondent at that time and do a civil standby (if court orders this) to allow respondent to get personal belongings.

If the respondent violates the order, please call 911 to make a report.

**Updated 07/2022**

## Instructions for Petition for an Extreme Risk Protection Order

An Extreme Risk Protection Order is designed to prevent individuals who are at high risk of harming themselves or others from accessing firearms by allowing an intimate partner, family, household members, and law enforcement to obtain a court order when there is demonstrated evidence that the person poses a significant danger, including danger as a result of threatening or violent behavior.

This type of order doesn't provide protections to the petitioner. It cannot order restraints against the respondent such as "do not harm," "stay away from," and "do not contact" the petitioner.

The court can order that the respondent surrender firearms and any concealed pistol licenses, and that respondent not possess or purchase firearms.

If the respondent is under 18 years old, use the form "Petition for Extreme Risk Protection Order – Respondent Under 18 Years."

This form is used to start the case. This form will be:

- Filed as a public court record and will start a civil court case.
- Served (personal delivery) to the person against whom you are seeking the order.

The information in the petition is used by the court to determine if:

- You are authorized to file this type of petition.
- The court has authority to enter an order on your behalf.
- The respondent's behavior meets the legal requirements for the court to grant the order.

This form is used to request both an immediate temporary order and a full order:

- If you have facts to support your fears, and the court finds an emergency exists, the court may immediately issue a temporary order that will last until the court holds a hearing, usually within 14 days.
  - The clerk shall forward a copy of the petition and the temporary order to law enforcement who will serve the respondent.
- There is no fee.
  - You must provide an address for the respondent.
  - The law enforcement officer completing service on the respondent must file an affidavit, declaration, or certificate of service with the court or the hearing cannot go forward.
- You must attend the hearing. At the hearing, the court will determine if it should issue a full order. The respondent has a right to attend that hearing and defend against your allegations.

## **Please Print Clearly Using Black or Blue Ink!**

### **Top of the form**

Fill in your name (first, middle initial, last) as the “Petitioner.” The person against whom you are filing is the “Respondent.” Fill in the respondent’s name (first, middle initial, last).

### **Who is Filing this Case** (Section 1)

The court must know who is filing this case.

- If you are a law enforcement officer, check the first checkbox and identify the agency. Also check the appropriate box about notice you’ve provided, or will attempt to provide, to the respondent’s intimate partner, family or household member, or any known third parties who may be at risk.
- If you are an intimate partner or family or household member, check the second checkbox in section 1 and also check the box identifying your relationship with the respondent.

### **Residency** (Section 2)

Check the applicable box/es.

### **Firearms** (Section 3)

The court needs to know the type and location of any firearms the respondent currently owns, possesses, has custody of, has access to, or controls. In section 3, check the type of firearm, list the number of each type, where the firearms are kept, and the date, time, and place you last saw them. You can use the *Firearm Identification Worksheet*, form XR 102, to help identify types of firearms. You may attach the *Firearm Identification Worksheet* to your petition.

In section 3, check the boxes that apply and write in the facts that explain the boxes you checked.

### **Court Cases Involving You** (Section 4)

This may not be the first court proceeding involving you and the respondent. The court will need to know about other cases, such as divorce, parentage, or criminal, or other restraining orders, protection orders, or no-contact orders.

If there are other cases or court orders involving you and the respondent, list the case name (the parties’ names), the case number (if you know it), the court (district, municipal, or superior) and the county, type of case, name of any protected person, and any times the respondent violated the order.

### **Court Cases Involving Others** (Section 5)

The court must know about any other court cases between the respondent and any other person. To the best of your knowledge, list any criminal or civil lawsuits; protection, restraining, or no-contact orders.

## **Request for Emergency Order** (Section 6)

You may fear that, **in the near future**, the respondent poses a **significant danger** of causing personal injury to others or to themselves, through the use of firearms. You can ask the court to restrict the respondent's right to firearms on a temporary basis, until the court hearing.

Check the box and describe the facts that support your fears.

## **Request for an Extreme Risk Protection Order** (Section 7)

Check this box to ask the court to issue a full Extreme Risk Protection Order that will last for one year.

## **Statement** (Section 8)

First read through the statement section in the petition before you start writing. There are several places for you to provide facts about the respondent's behavior and describe your reasons for filing this case.

## **Convictions or Arrests** (Section 8)

The court will consider the respondent's criminal history involving felonies, domestic violence, hate crime offenses, and violent crimes. If you have knowledge that the respondent has been arrested or convicted of such crimes, check the appropriate box/es and describe.

## **Violence and Threats** (Section 9)

The court will consider the behavior that causes you to fear the respondent poses a significant danger of causing personal injury to others, or to him or herself. Check each box that applies and describe exactly what happened. Include details such as dates, locations, statements, and injuries. You may attach additional pages if you need more room to write.

## **Respondent's Behavior** (Section 10)

The court will consider any behaviors that present an imminent threat of harm to self or others. Describe anything the respondent has said or done that causes you to fear such harm.

## **Evidence of Alcohol or Substance Abuse** (Section 11)

Describe evidence of respondent's abuse of alcohol, legal or illegal drugs, including driving under the influence of alcohol or drugs.

## **Other** (Section 12)

If you have additional information to help the court make a decision, describe it here. If you have additional documents such as records, reports, printouts of text messages or other social media, you may attach them to the petition.

Alert: Any medical records must be filed under seal

## **Service** (Section 13)

The responding party has the right to file a written response to your petition. You must give a service address to get a copy of any response. You can choose to list a mailing and/or an email address. You have the right to keep your home address confidential. You can use a post office box or the address of a friend or relative you trust to tell you immediately if you get any legal papers. Regularly check for a response.

## **Sign the Form**

When you are done completing the petition, you will swear to the truthfulness of your statement. Put the date you signed the petition in the date line and fill in the city where you are completing this form.

Sign the form. Print your name below your signature. If you are a law enforcement officer, include your badge/personnel number. If you are an attorney, include your Washington State Bar Association number.

## **Law Enforcement and Confidential Information – Extreme Risk Protection Order**

You must complete a Law Enforcement and Confidential Information form, XR 105. This form is confidential, and it does not go in the public court file and is not served on the respondent.

- It is used by Law Enforcement to locate and identify the respondent when serving documents.
- It is also used by Law Enforcement when entering the order in the state-wide database.

Complete as much information as possible, especially first name, middle initial, last name, and date of birth.

If the respondent has a disability, brain injury, or other impairment, of which you are aware, you may know of special assistance that law enforcement could provide when serving the documents. For example:

“Respondent has a brain injury. If respondent is rushed, respondent may freeze up and may not respond quickly, or may become verbally aggressive. Remind respondent to contact a friend.”

“Respondent has epilepsy and diabetes and may have seizures when stressed. Respondent doesn’t respond well to being rushed and will need time to get meds and supplies.”

Superior Court of Washington, County of Skagit

\_\_\_\_\_  
Petitioner

vs.

\_\_\_\_\_  
Respondent

\_\_\_\_\_  
DOB

No. \_\_\_\_\_

**Petition for an Extreme Risk  
Protection Order  
(PTXR)**

**Petition for an Extreme Risk Protection Order**

**1. Who is filing this petition?**

- I am filing on behalf of \_\_\_\_\_ law enforcement agency.
- I have already notified the respondent's intimate partner, family or household members, and any known 3rd parties who may be at risk of violence; OR
- My agency will make a good faith effort to provide notice to them by
  - telephone  email  in-person  other \_\_\_\_\_ within a reasonable period of time.
- I am an intimate partner or family or household member of the respondent. My relationship with the respondent is (*check all that apply*):

**Intimate Partners**

- current or former spouses or domestic partners
- parents of a child-in-common (*unless child was conceived through sexual assault*)
- current or former dating relationship (age 13 or older) who
  - never lived together
  - live or have lived together

**Family or household members**

- parent and child
- grandparent and grandchild
- current or former cohabitants as roommates
- person who is or has been a legal guardian
- related by blood or marriage (*specify how*) \_\_\_\_\_
- stepparent and stepchild
- parent's intimate partner and child

**2. What is your connection to this county?**

- I reside in this county.
- I am filing on behalf of a law enforcement agency that is located in this county.
- The Respondent resides in this county.

**3. Based on your knowledge, what firearms does the respondent currently own, possess, has custody of, has access to or controls? Please describe.**

| Type of firearm                                       | How many firearms? | Where is the firearm kept? | Date/time/place you last saw the firearm |
|---|--------------------|----------------------------|--|
| <input type="checkbox"/> Handgun                      |                    |                            |  |
| <input type="checkbox"/> Shotgun / Rifle              |                    |                            |  |
| <input type="checkbox"/> Semi-Automatic Assault Rifle |                    |                            |  |
| <input type="checkbox"/> Other                        |                    |                            |  |

**Check all the boxes that apply and describe below:**

- Respondent has access to someone else’s firearm.
- Respondent expressed an intent to obtain a firearm.
- Respondent has unlawfully or recklessly used, displayed, or brandished a firearm.
- Respondent recently acquired a firearm.

Describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**4. Between the respondent and me:** List any criminal or civil protection, restraining or no-contact orders, pending lawsuits, or other legal action: *If you have more than three matters, list details on additional sheet.*

|                    | Case #1 | Case #2 | Case #3 |
|--------------------|---------|---------|---------|
| Case Name          |         |         |         |
| Case Number        |         |         |         |
| Court/County/State |         |         |         |
| Type of Case       |         |         |         |



|                                |  |  |  |
|--------------------------------|--|--|--|
| Protected Person               |  |  |  |
| Was there any order violation? |  |  |  |

5. **Between the respondent and any other person:** List any criminal or civil protection, restraining or no-contact orders: *If you have more than 3 matters, list details on additional sheet.*

|                                | Case #1 | Case #2 | Case #3 |
|--------------------------------|---------|---------|---------|
| Protected Person               |         |         |         |
| Case Number                    |         |         |         |
| Court/County/State             |         |         |         |
| Was there any order violation? |         |         |         |

---

**Request for Extreme Risk Protection Order**

6.  **Immediate Protection:** I want a temporary Extreme Risk Protection Order to start immediately, without prior notice to the respondent, that lasts up to 14 days, or until the court hearing.

These are the specific facts known to me that cause me to believe the respondent poses a **significant danger in the near future** of causing personal injury to self or others by having custody or control of, purchasing, possessing, accessing, receiving, or attempting to purchase or receive firearms. More detailed information is provided in the Statement in section 7.

---



---



---



---

7.  **After a hearing, where the respondent has a right to be present, I want the court to issue an Extreme Risk Protection Order that lasts for one year.**

After the hearing, I want the court to issue an Extreme Risk Protection Order that lasts for 1 year because the respondent poses a significant danger of causing personal injury to self or others by having custody or control of, purchasing, possessing, accessing receiving, or attempting to purchase or receive firearms.

My statement below includes the respondent's specific words, actions, or other facts that cause me to have a reasonable fear of **future** dangerous acts by respondent.

---

**Statement**

To enter an Extreme Risk Protection Order, the court must find it more likely than not that the Respondent poses a significant danger of causing personal injury to self or others by having custody or control, purchasing, possessing, accessing, receiving, or attempting to purchase or receive a firearm.

**Complete all of the following sections that apply.** Attach additional pages, as needed.

**8. Convictions or Arrests.** Check all the boxes that apply and describe below:

Respondent has been arrested or convicted of a:

domestic violence crime.

felony or violent crime.

hate crime offense or malicious harassment (threats, physical injury, or property damage based on the victim's race, color, religion, ancestry, national origin, gender, sexual orientation, gender expression or identity, or mental, physical, or sensory disability).

Describe. Include location, court name, and case number, if known.

---

---

---

---

**9. Violence and Threats:** Check each box that applies and explain below.

Respondent has recently committed or threatened violence against self or others, whether or not respondent had a firearm.

Respondent has shown, within the past 12 months, a pattern of acts or threats of violence, which can include violent acts against self or others.

Respondent has a history of use, attempted use, or threatened use of physical force against another person.

Respondent has a history of stalking another person.

Explain:

**Date/When**

**Describe What Happened**

---

---

---

---

---

---

---

---

**10. Respondent's behavior**

Describe any behaviors by the respondent that present an imminent threat of harm to self or others.

---

---

---

---

**11. Corroborated evidence of Respondent's alcohol or controlled substance abuse.**

Describe any evidence and attach any documents corroborating (supporting) the respondent's abuse of alcohol, legal or illegal drugs.

---

---

---

**12. Other important information** that you think will help the court make a decision.

---

---

---

---

**13. You must provide an address where you can be served with legal documents.**

What is your address for receiving legal documents? You have the right to keep your residential address private. You may use a different mailing address. Law enforcement petitioners, list your department address.

Mail: \_\_\_\_\_

Email: \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Dated: \_\_\_\_\_ at \_\_\_\_\_, Washington

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Print Name and if Law enforcement                      Badge No.

**Law Enforcement and Confidential Information – Extreme Risk Protection Order (LECIF)**

**Clerk: Do not file in a public access file. Give to law enforcement.**

Superior Court of Washington

County: Skagit

Case No.: \_\_\_\_\_

***Do NOT serve or show this sheet to the Respondent***

**Type or print clearly!** If law enforcement cannot read this form, they cannot serve or enforce your order!

**Respondent's Info** – Fill out as much as you can. If you do not know, write "unknown."

|  |                              |               |   |  |  |
|--|------------------------------|---------------|---|--|--|
| <b>Name:</b> First   |                              | Middle        | Last  | Date of Birth<br>(if unknown give age range) |  |
| Nickname/Alias/AKA ("Also known as")   |                              |               |   | Relationship to Petitioner                   |  |
| Sex  | Race                         |               | Height  | Weight                                       |  |
| Eye Color  | Hair Color                   |               | Skin Tone                                     | Build  |  |
| Phone/s with Area Code (voice):  |                              |               | Need Interpreter?<br>[ ] Yes [ ] No Language: |  |  |
| <b>Where can the Respondent be served?</b> List all known contact information. |                              |               |   |  |  |
| Last Known Address. Street:  |                              |               |   |  |  |
| City:  |                              | State:        |   | Zip:   |  |
| Cell number (text):  |                              |               | Email:  |  |  |
| Social Media Account/s & User Name/s:  |                              |               |   |  |  |
| Other:   |                              |               |   |  |  |
| Employer   | Employer's Address           |               |   | Employer's Phone                             |  |
| Work Hours   | Drivers License or ID number |               |   | State  |  |
| Vehicle Make and Model   | Vehicle License Number       | Vehicle Color |   | Vehicle Year                                 |  |

**Disability, hazard, and weapon info about the Respondent**

Law enforcement needs this info to serve your order safely

**Does the Respondent have a disability, brain injury, or impairment requiring special assistance** when law enforcement serves the order?  No  Yes. If yes, describe (add pages, if needed): \_\_\_\_\_

**Hazard Information** Respondent's History includes:

- Involuntary/Voluntary Commitment  Suicide Attempt or Threats (How recent? \_\_\_\_\_)
- Threats to "suicide by cop"  Assault  Assault with Weapons  Alcohol/Drug Abuse
- Other: \_\_\_\_\_

**Concealed Pistol License:**  Yes  No

**Weapons:**  Handguns  Rifles  Knives  Explosives  Unknown  
 Other (include unassembled firearms and specify): \_\_\_\_\_

**Location of Weapons:**  Vehicle  On Person  Residence Describe in detail:

Has the respondent had advanced or military firearms training  Yes  No  Unknown  
If yes, describe below (continue on separate sheet, if needed):

**Current Status**

Is the respondent a current or former cohabitant as an intimate partner?  Yes  No

Are you and the respondent living together now?  Yes  No

Does the respondent know you are trying to get this order?  Yes  No

Is the respondent likely to react violently when served?  Yes  No

**Petitioner's Info**

|                    |            |      |               |        |
|--------------------|------------|------|---------------|--------|
| <b>Name:</b> First | Middle     | Last | Date of Birth |        |
| Sex                | Race       |      | Height        | Weight |
| Eye Color          | Hair Color |      | Skin Tone     | Build  |

If your information **is not confidential**, you must enter your address and phone number/s below.

|                          |   |
|--------------------------|---|
| Current Address. Street: | Phone(s) w/Area Code  |
| City: State: Zip:        |   |
| Email address:           | Need interpreter? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, language: |

If your info **is confidential**, you must give a name, address, and phone of someone willing to be your "contact."

|                 |               |
|-----------------|---------------|
| Contact Name:   |               |
| Contact Address | Contact Phone |

If petitioner is represented by an attorney, enter the attorney's name, WSBA #, address, and phone number:

**Privacy Notice:** Only court staff, law enforcement, and some state agencies may see this form. The other party and their lawyer may not see this form unless a court order allows it. State agencies may disclose the information in this form according to their own rules.

**Changes:** If any information changes, fill out another copy of this form and file it with the court clerk.

I declare under penalty of perjury under the laws of the state of Washington that: 1) the information on this form about me is true and correct; 2) the information about the other party is the legitimate, current, or last known contact information.

I have attached \_\_\_\_\_ pages.

Signed at (*city and state*): \_\_\_\_\_ Date: \_\_\_\_\_



\_\_\_\_\_  
Petitioner or Respondent signs here

\_\_\_\_\_  
Print name here

Superior Court of Washington, County of Skagit

\_\_\_\_\_  
Petitioner

vs.

\_\_\_\_\_  
Respondent

DOB \_\_\_\_\_

No.

**Temporary Extreme Risk Protection Order - Without Notice (EXRPO)**

Next Hearing Date/Time: \_\_\_\_\_

Court address:

At: 205 W. Kincaid St. Rm 202  
Mount Vernon WA

Clerk's Action Required: **4, 5, 6, 7**

**Temporary Extreme Risk Protection Order - Without Notice**

**Warning to Respondent!** You are prohibited from having a firearm in your custody or control, or from purchasing, possessing, accessing, receiving, or attempting to purchase or receive any firearm. You must surrender any and all firearms including but not limited to the firearms as described below. If you violate this order, you may be charged with a crime and you may not be able to have a firearm for at least 5 more years after this order expires. RCW 7.105.460(2).

***You have the sole responsibility to not violate this order. Only the court may change this order and only after written application.***

**Respondent's Distinguishing Features:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Respondent Identifiers**

|        |        |      |
|--------|--------|------|
| Sex    | Race   | Hair |
|        |        |      |
| Height | Weight | Eyes |
|        |        |      |

**This temporary order expires at the end of the next hearing date listed above.**

**Respondent:** You must immediately surrender all firearms and any concealed pistol licenses listed below. If you have other firearms, you must surrender all of them also:

|  |  |
|--|--|
|  |  |
|  |  |

|  |  |
|--|--|
|  |  |
|--|--|

Attach additional sheet if there are more firearms to list.

**Respondent:** This order is valid until the date and time noted above. You are required to surrender all firearms in your custody, control, or possession. You may not have in your custody or control, access, possess, purchase, receive, or attempt to purchase or receive, a firearm, or a concealed pistol license, while this order is in effect. You must surrender to the (*name of local law enforcement agency*) \_\_\_\_\_ all firearms in your custody, control, or possession and any concealed pistol license issued to you under RCW 9.41.070 immediately. A hearing will be held on the date and time noted above to determine if an extreme risk protection order should be issued. Failure to appear at the hearing may result in a court making an order against you that is valid for one year. You may seek the advice of an attorney as to any matter connected with this order.

**Respondent:**

**1. Firearms Surrender. You must immediately surrender all firearms by these deadlines:**

- A. Personally served:** If this order is served by a law enforcement officer, immediately surrender all firearm(s) and any concealed pistol license/s to the serving officer.
- B. Attended the hearing:** If you attended the hearing where the court issued this order, surrender the firearm/s and concealed pistol license/s to the law enforcement agency listed in this order on the same day as the hearing. Contact the law enforcement agency for directions on how to surrender the firearm/s. Do not bring weapons to the courthouse for surrender.
- C. Alternative service:** If you are served by other means, you must surrender all firearm/s to the control of local law enforcement agency within 24 hours of being served.

**2. Ex Parte Hearing**

- The court issues this temporary order without a hearing.
- The court held a hearing before issuing this temporary order. These people attended:

|                                       |                                    |                                   |                                   |
|---------------------------------------|------------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Petitioner   | <input type="checkbox"/> in person | <input type="checkbox"/> by phone | <input type="checkbox"/> by video |
| <input type="checkbox"/> Respondent   | <input type="checkbox"/> in person | <input type="checkbox"/> by phone | <input type="checkbox"/> by video |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> in person | <input type="checkbox"/> by phone | <input type="checkbox"/> by video |

**3. Based upon the evidence presented, the court finds** reasonable cause to believe the Respondent poses a significant danger of causing personal injury to self or others **in the near future** by having in Respondent's custody or control, purchasing, possessing, accessing, receiving, or attempting to purchase or receive firearms based upon (**check all that apply**):

- a.  Respondent has access to someone else's firearm/s.
- b.  Respondent owns a firearm/s or has expressed intent to obtain a firearm/s.



- c.  Respondent has unlawfully or recklessly used, displayed, or brandished a firearm.
- d.  Respondent recently acquired a firearm/s.
- e.  Respondent violated a civil or criminal protection order, no-contact order or restraining order.
- f.  Respondent was/is the subject of a previous or current extreme risk protection order.
- g.  Respondent violated a previous or current extreme risk protection order.
- h.  Respondent has been arrested for or convicted of a domestic violence crime as defined in RCW 10.99.020.
- i.  Respondent has been arrested for or convicted of a felony offense or violent crime.
- j.  Respondent has been convicted of a hate crime under RCW 9A.36.080.
- k.  Respondent has recently committed or threatened violence against self or others, whether or not Respondent had a firearm.
- l.  Respondent has shown, within the past 12 months, a pattern of acts or threats of violence, which can include violent acts against self or others.
- m.  Respondent has a history of use, attempted use, or threatened use of physical force against another person.
- n.  Respondent has a history of stalking another person.
- o.  Respondent's behaviors present an imminent threat of harm to self.
- p.  Respondent's behaviors present an imminent threat of harm to others.
- q.  There is corroborative evidence of Respondent's abuse of  alcohol or  controlled substances.
- r.  Other: \_\_\_\_\_

**4. Washington Crime Information Center (WACIC) and Other Data Entry**

**Clerk's Action.** The court clerk shall forward a copy of this order immediately to the following law enforcement agency (*county or city*) \_\_\_\_\_

(*check only one*):  Sheriff's Office or  Police Department

This agency shall enter this order into WACIC and National Crime Info. Center (NCIC).

**5. Service**

**Required.** The restrained person must be served with a service packet, including a copy of this order, the petition, and any supporting materials filed with the petition.

The **law enforcement agency** where the restrained person lives or can be served shall serve the restrained person with the service packet and shall promptly complete and return proof of service to this court.

Law enforcement agency: (*county or city*) \_\_\_\_\_  
(*check only one*):  Sheriff's Office or  Police Department

**Clerk's Action.** The court clerk shall forward a service packet on or before the next judicial day to the agency and/or party checked above. The court clerk shall also provide a copy of the service packet to the protected person.

**Alternative Service Allowed.** The court authorizes alternative service by separate order (*specify*):\_\_\_\_\_.

**Not required.** See section 2 above for appearances.

The restrained person appeared at the hearing where this order was issued and received a copy.

The restrained person appeared at the hearing where this order was issued but refused to accept a copy of this order. Additional service is not required.

The restrained person appeared remotely or left the hearing early but received actual notice of the order. Additional service is not required and proof of service is not necessary.

**6.  Service on Others**

Service on the adult's guardian/conservator (*name/s*) \_\_\_\_\_ is:

**Required.**

The **law enforcement agency** where the person to be served lives or can be served shall serve a copy of this order and shall promptly complete and return proof of service to this court.

Law enforcement agency: (*county or city*) \_\_\_\_\_  
(*check only one*):  Sheriff's Office or  Police Department

The **protected person** or person filing on their behalf shall make private arrangements for service and have proof of service returned to this court.

**Clerk's Action.** The court clerk shall forward a copy of this order on or before the next judicial day to the agency and/or party checked above.

**Not required.** They appeared at the hearing where this order was issued and received a copy.

**7. DOL Notification**

The issuing court shall, within three judicial days after this order is issued, forward a copy of the Respondent's driver's license, identicaid, or comparable information along with the date of issuance to DOL. If respondent has a concealed pistol license, DOL must immediately notify a law enforcement agency that the court has directed the revocation of the license.

**8. Transfer to Superior Court**

This case is transferred to Superior Court and all actions in this case will be handled in the Superior Court listed below.

**Court Hearing.** A hearing is scheduled in \_\_\_\_\_ County Superior Court on (*date*) \_\_\_\_\_, at (*time*) \_\_\_\_\_ a.m./p.m.

at (location): \_\_\_\_\_  
See **How to Attend** below.

**9. After-Hours Order - Law Enforcement Petitions**





[ ] The below named judicial officer directs the Petitioner to affix the judge’s signature below, to signify that the judicial officer has reviewed the petition and evidence presented and found that it established reasonable cause for the issuance of this temporary extreme risk protection order – without notice. Permission to affix the judicial officer’s signature was communicated by:



[ ] telephone [ ] email [ ] fax [ ] other reliable method (specify): \_\_\_\_\_

**RESPONDENT: You must appear at the next hearing stated on page 1 of this order.**

**How to attend the next court hearing** (date and time on page 1)

The hearing scheduled on page 1 will be held:

|   |  |
|---|--|
|    | <p><b>In person</b></p> <p>Judge/Commissioner: _____ Courtroom: _____</p> <p>Address: 205 W. Kincaid St. Rm 202, Mount Vernon WA</p>   |
|   | <p><b>Online (audio and video)</b> App: _____</p> <p>[ ] Log-in: _____</p> <p>[ ] You must get permission from the court at least 3 court days before your hearing to participate online (audio and video). To make this request, contact: _____</p> |
|  | <p><b>By Phone (audio only)</b> [ ] Call-in number _____</p> <p>[ ] You must get permission from the court at least 3 court days before your hearing to participate by phone only (without video). To make this request, contact: _____</p>          |
|  | <p><b>If you have trouble connecting online or by phone</b> (instructions, who to contact)</p> <p>_____</p> <p>_____</p>   |

|  |  |   |   |
|--|--|---|---|
|           | <b>Ask for an interpreter, if needed.</b><br>Contact: _____<br>_____ |  | <b>Ask for disability accommodation, if needed. Contact:</b> _____<br>_____ |
| Ask for an interpreter or accommodation as soon as you can. Do not wait until the hearing! |  |   |   |

Voluntarily surrendering firearms or providing testimony regarding the surrender of firearms pursuant to an extreme risk protection order may not be used against you in any criminal prosecution under chapters 7.105, 9.41, or 9A.56.310 RCW.

Dated: \_\_\_\_\_ at \_\_\_\_\_ a.m./p.m. \_\_\_\_\_

**Judge/Commissioner**

\_\_\_\_\_  
 Print Judge/Commissioner Name

Presented by:

\_\_\_\_\_  
 Signature of Petitioner/Attorney      WSBA No.

\_\_\_\_\_  
 Print Name / Badge Number, if applicable

**The Petitioner or Petitioner's attorney must complete the *Law Enforcement and Confidential Information – Extreme Risk Protection Order, form XR 105.***

Superior Court of Washington, County of Skagit

\_\_\_\_\_  
Petitioner

vs.

\_\_\_\_\_  
Respondent

\_\_\_\_\_  
DOB

No.

Extreme Risk Protection Order (XRPO)

[ ] Renewal (ORRXRPO)

Next Hearing Date/Time: \_\_\_\_\_

Court address:

205 W. Kincaid St. Rm 202

Mount Vernon WA

Clerk's Action Required: **6, 7, 8, 9**

**Extreme Risk Protection Order**

**Warning to Respondent!** You are prohibited from having a firearm in your custody or control, or from purchasing, accessing, possessing, or receiving, or attempting to purchase or receive any firearm or a concealed pistol license. You must surrender any and all firearms including but not limited to firearms as described below. Under RCW 7.105.460(2), if you violate this order, you may be charged with a crime and you may not be able to have a firearm for at least 5 more years after this order expires.

***You have the sole responsibility to not violate this order. Only the court may change this order and only after written application.***

**Respondent's Distinguishing Features:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Respondent Identifiers**

|        |        |      |
|--------|--------|------|
| Sex    | Race   | Hair |
|        |        |      |
| Height | Weight | Eyes |
|        |        |      |

**This 1-year order expires on date: \_\_\_\_\_ time: \_\_\_\_\_ a.m./p.m.**

**Respondent:** You must immediately surrender all firearms and any concealed pistol licenses listed below. If you have other firearms, you must surrender all of them also:

\_\_\_\_\_

|  |  |
|--|--|
|  |  |
|--|--|

Attach additional sheet if there are more firearms to list.

**Respondent:** This order will last until the date and time noted above. If you have not done so already, you must immediately surrender to the (*name of local law enforcement agency*)

---

all firearms in your custody, control, or possession and any concealed pistol licenses issued to you under RCW 9.41.070. You may not have in your custody or control, access, purchase, possess, receive, or attempt to purchase or receive, a firearm, or a concealed pistol license, while this order is in effect. You have the right to request 1 hearing to terminate this order in every 12 month period that this order is in effect, starting from the date of this order and continuing through any renewals. You may seek the advice of an attorney as to any matter connected with this order.

**Respondent:**

1. **Firearms Surrender. You must immediately surrender all firearms by these deadlines:**
  - A. **Personally served:** If this order is served by a law enforcement officer, immediately surrender all firearm/s and any concealed pistol license/s to the serving officer.
  - B. **Attended the hearing:** If you attended the hearing where the court issued this order, surrender the firearm/s and concealed pistol license/s to the law enforcement agency listed in this order on the same day as the hearing. Contact the law enforcement agency for directions on how to surrender the firearm/s. Do not bring weapons to the courthouse for surrender.
  - C. **Alternative service:** If you are served by other means, you must surrender all firearm/s to the control of local law enforcement agency within 24 hours of being served.

**This Extreme Risk Protection Order is based upon the following:**

2. **Notice:** Respondent received notice of this hearing by  personal service  publication  mail.
3. **Hearing:** The court held a hearing before issuing this full protection order. These people attended:

|  |                                    |                                   |                                   |
|--|------------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Petitioner          | <input type="checkbox"/> in person | <input type="checkbox"/> by phone | <input type="checkbox"/> by video |
| <input type="checkbox"/> Petitioner's Lawyer | <input type="checkbox"/> in person | <input type="checkbox"/> by phone | <input type="checkbox"/> by video |
| <input type="checkbox"/> Respondent          | <input type="checkbox"/> in person | <input type="checkbox"/> by phone | <input type="checkbox"/> by video |
| <input type="checkbox"/> Respondent's Lawyer | <input type="checkbox"/> in person | <input type="checkbox"/> by phone | <input type="checkbox"/> by video |
| <input type="checkbox"/> Other: _____        | <input type="checkbox"/> in person | <input type="checkbox"/> by phone | <input type="checkbox"/> by video |
4. **The Court finds:** By a preponderance of the evidence that the Respondent poses a significant danger of causing personal injury to self or to others in **the future** by having in Respondent's custody or control, purchasing, possessing, accessing, receiving, or attempting to purchase or receive a firearm; based upon (**check all that apply,**):
  - a.  Respondent has access to someone else's firearm/s.
  - b.  Respondent owns a firearm/s or has expressed intent to obtain a firearm.

- c.  Respondent has unlawfully or recklessly used, displayed, or brandished a firearm.
- d.  Respondent recently acquired a firearm/s.
- e.  Respondent violated a civil or criminal protection order, no-contact order or restraining order.
- f.  Respondent was/is the subject of a previous or current extreme risk protection order.
- g.  Respondent violated a previous or current extreme risk protection order.
- h.  Respondent has been arrested for or convicted of a domestic violence crime as defined in RCW 10.99.020.
- i.  Respondent has been arrested for or convicted of a felony offense or violent crime.
- j.  Respondent has been convicted of a hate crime under RCW 9A.36.080.
- k.  Respondent has recently committed or threatened violence against self or others, whether or not Respondent had a firearm.
- l.  Respondent has shown, within the past 12 months, a pattern of acts or threats of violence, which can include violent acts against self or others.
- m.  Respondent has a history of use, attempted use, or threatened use of physical force against another person.
- n.  Respondent has a history of stalking another person.
- o.  Respondent's behaviors present an imminent threat of harm to self.
- p.  Respondent's behaviors present an imminent threat of harm to others.
- q.  There is corroborative evidence of Respondent's abuse of  alcohol or  controlled substances.
- r.  Other: \_\_\_\_\_

**5. Evaluation:** The court has considered whether it is appropriate to order a behavioral health evaluation of the Respondent. The court finds that conducting a behavioral health evaluation is  appropriate  not appropriate.

**Respondent:** You must have a behavioral health evaluation completed by a qualified evaluator within \_\_\_\_\_ days of this order. Proof of obtaining the evaluation must be filed with this court within \_\_\_\_\_ days of completion.

While appropriate, the court is not ordering an evaluation for the following reason/s:

\_\_\_\_\_

**6. Washington Crime Information Center (WACIC) and Other Data Entry**

**Clerk's Action.** The court clerk shall forward a copy of this order immediately to the following law enforcement agency (*county or city*) \_\_\_\_\_

(*check only one*):  Sheriff's Office or  Police Department  
 (*List the same agency that entered the temporary order, if any*)

This agency shall enter this order into WACIC and National Crime Info. Center (NCIC).

**7. Service on the Restrained Person**

**Required.** The restrained person must be served with a copy of this order.

The **law enforcement agency** where the restrained person lives or can be served shall serve the restrained person with a copy of this order and shall promptly complete and return proof of service to this court.

Law enforcement agency: (*county or city*) \_\_\_\_\_  
(*check only one*):  Sheriff's Office or  Police Department

The **petitioner** shall make private arrangements for service and have proof of service returned to this court. (*This is only an option if surrender of weapons is **already completed and verified by the court.***)

**Clerk's Action.** The court clerk shall forward a copy of this order on or before the next judicial day to the agency and/or party checked above. The court clerk shall also provide a copy of the order to the protected person.

**Alternative Service Allowed.** The court authorizes alternative service by separate order (*specify*): \_\_\_\_\_

**Not required.** See section 3 above for appearances.

The restrained person appeared at the hearing where this order was issued and received a copy.

The restrained person appeared at the hearing where this order was issued but refused to accept a copy of this order. Additional service is not required.

The restrained person appeared remotely or left the hearing early but received actual notice of the order. Additional service is not required and proof of service is not necessary.

**8.  Service on Others**

Service on the adult's guardian/conservator (*name/s*) \_\_\_\_\_ is:

**Required.**

The **law enforcement agency** where the person to be served lives or can be served shall serve a copy of this order and shall promptly complete and return proof of service to this court.

Law enforcement agency: (*county or city*) \_\_\_\_\_  
(*check only one*):  Sheriff's Office or  Police Department

The **petitioner** shall make private arrangements for service and have proof of service returned to this court.

**Clerk's Action.** The court clerk shall forward a copy of this order on or before the next judicial day to the agency and/or party checked above.

**Not required.** They appeared at the hearing where this order was issued and received a copy.

**9. DOL Notification**

The issuing court shall, within 3 judicial days after this order issued, forward a copy of the Respondent's driver's license, identicard, or comparable information along with the









date of issuance to DOL. If respondent has a concealed pistol license, DOL must immediately notify a law enforcement agency that the court has directed the revocation of the license.

**Respondent: You must attend the hearing listed on page 1 of this order** and show the court that you surrendered your firearm/s and concealed pistol license/s.

Voluntarily surrendering firearms or providing testimony regarding the surrender of firearms pursuant to an extreme risk protection order may not be used against you in any criminal prosecution under chapters 7.105, 9.41, or 9A.56.310 RCW.

**How to attend the hearing on page 1**

The hearing scheduled on page 1 will be held:

|   |  |  |
|---|--|--|
|    | <p><b>In person</b></p> <p>Judge/Commissioner: _____ Courtroom: _____</p> <p>Address: 205 W. Kincaid St Rm 202, Mount Vernon WA 98273</p>  |  |
|    | <p><b>Online (audio and video)</b> App: _____</p> <p><input type="checkbox"/> Log-in: _____</p> <p><input type="checkbox"/> You must get permission from the court at least 3 court days before your hearing to participate online (audio and video). To make this request, contact: _____</p> |  |
|  | <p><b>By Phone (audio only)</b> <input type="checkbox"/> Call-in number _____</p> <p><input type="checkbox"/> You must get permission from the court at least 3 court days before your hearing to participate by phone only (without video). To make this request, contact: _____</p>          |  |
|  | <p><b>If you have trouble connecting online or by phone</b> (instructions, who to contact)</p> <p>_____</p> <p>_____</p>   |  |
|  | <p><b>Ask for an interpreter, if needed.</b></p> <p>Contact: _____</p> <p>_____</p>  |  <p><b>Ask for disability accommodation, if needed.</b> Contact: _____</p> <p>_____</p> |

Ask for an interpreter or accommodation as soon as you can. Do not wait until the hearing!

Dated: \_\_\_\_\_ at \_\_\_\_\_ a.m./p.m. \_\_\_\_\_

Judge/Commissioner

\_\_\_\_\_  
Print Judge/Commissioner Name

I acknowledge receipt of a copy of this order.

\_\_\_\_\_  
Signature of Respondent

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Respondent's Attorney WSBA No.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Petitioner/Attorney WSBA No.

\_\_\_\_\_  
Print Name and Badge No., if applicable

**The Petitioner or Petitioner's lawyer must complete the Confidential and Law Enforcement Information – Extreme Risk Protection Order form, XR 105.**

**NOTICES:**

**To Petitioner:** You may file a motion to ask the court to renew this 1-year order. You may begin that process no sooner than 90 days prior to the date this order expires (see page 1).

**To Respondent:** You may file a motion requesting the court to terminate this 1-year order. You may make this request only once during the 1-year period of this order.

**To both parties:** The court will consider any motion to terminate or renew this order only upon the filing of a written motion, the scheduling of a hearing, and notice to the other party.

**Respondent: Read more information about surrender of weapons.**

**Receipt:** The law enforcement officer who receives your firearms will prepare a receipt with a list of the firearms and any concealed pistol license/s. The law enforcement officer must file the receipt with the court within 72 hours. The officer will give you a copy of the receipt to keep for your records.

**If someone else owns the firearms:** If the law enforcement agency determines someone else is the lawful owner of the firearm/s, the agency will return the firearm to the lawful owner, if:

- the firearm is removed from the Respondent's custody, control, and possession;
- the lawful owner provides written verification to the court regarding how they will safely store the firearm in a way that Respondent does not have access and control of the firearm;
- the court advises the lawful owner of the penalty for failure to do so; and
- the owner is lawfully authorized to possess the firearm.