Clear Form

INFORMATION NEEDED FOR SHERIFF'S DEPARTMENT

Sheriff's Case Number_____

Case Number _____

PETITIONER'S INFORMATION

Petitioner's Name: _____ Home Phone: _____

Address: _____ Cell Phone: _____

_____ Work Phone: _____

RESPONDENT'S INFORMATION

Respondent's Name: _____

Respondent's Relationship to Petitioner: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Other Addresses: _____

Other Phone Numbers _____ Best Time and Place to Serve: _____

Place of Employment: _____ Work Address: _____

Work Phone: _____ Hours of Work:_____

Work in Office/Plant or out in Field: _____

RESPONDENT'S PERSONAL INFORMATION

DOB: _____ Race: _____ Sex: _____

Height: _____ Weight: _____ Hair: _____

Eyes: _____ Glasses: ☐ Y / ☐ N Mustache: ☐ Y / ☐ N Beard: ☐ Y / ☐ N

Scars, Marks or Tattoos: _____

S. S. #: _____ D. L.: _____

RESPONDENT'S VEHICLE DESCRIPTION

Make: _____ Model: _____ Year: _____ License:_____ Color: _____

Make: _____ Model: _____ Year: _____ License: _____ Color: _____

PLEASE ANSWER ALL THE FOLLOWING QUESTIONS:

1. Does respondent have access to weapons? ☐ Y / ☐ N
   If yes, How many and what kind? _____
   Carry on person ☐ Y / ☐ N or vehicle ☐ Y / ☐ N?
   Where is it kept? _____
2. Does respondent use drugs ☐ Y / ☐ N or alcohol ☐ Y / ☐ N? Does respondent receive treatment? ☐ Y / ☐ N
3. On any kind of Medication? ☐ Y / ☐ N For what? _____
4. Has the respondent been arrested? ☐ Y / ☐ N
   For what? _____ Date of arrest? _____
5. Has the respondent ever talked about or threatened to harm themselves or a law enforcement officer? ☐ Y / ☐ N
6. Does the respondent get easily agitated or excited? ☐ Y / ☐ N
7. Does the respondent have any health problems or diseases? ☐ Y / ☐ N What? _____
8. Any other information that may help us in serving the Order of Protection? _____
9. You may provide a contact number if you wish to receive notification (excluding out of county service) that a document has been served on this case.
   ☐ Yes, I would like to be contacted at this secure phone number _____ ☐ No, not at this time.
   Please be aware that calls will be generated 24-hours per day, within 20 minutes of the time the document has been processed by the Sheriff's department.

This automated system was designed to alert you when possible of Document Service. Call 911 if you are in danger or crisis. Stay safe and contact the sheriff at 815-319-6100 for questions, changes, or confirmation if you do not receive a call.