

**APPLICATION FOR  
RELIEF FROM ABUSE**

JD-FM-137 Rev. 2-10 C.G.S. §§ 29-28, 29-32, 29-33,  
46b-15, 46b-38nn, 46b-38oo, 52-231a

**STATE OF CONNECTICUT  
SUPERIOR COURT**

[www.jud.ct.gov](http://www.jud.ct.gov)

**Instructions  
To Applicant**

- 1. Use a typewriter or print clearly in ink. You must also complete an Affidavit, form JD-FM-138. Give both forms to the Clerk of Court.
- 2. After your Application and Affidavit are processed, the clerk will give you the proper papers to have served on the Respondent.
- 3. Make sure the originals are returned to court after service.

**Instructions  
To Clerk**

- 1. If Ex Parte relief is ordered, prepare the following forms: Order of Protection, form JD-CL-99, and if applicable, Additional Orders of Protection, form JD-CL-100; Order and Notice of Court Hearing, form JD-FM-140; General Restraining Order Notifications (Family), form JD-CL-104.
- 2. If Ex Parte relief is NOT ordered, prepare Order and Notice of Court Hearing, form JD-FM-140.
- 3. Provide the Applicant with the original and one copy of the Application and Affidavit. Retain copies of each for court file.
- 4. Provide the Applicant with the Procedures For Relief From Abuse Process brochure JDP-FM-142 for further information.

Judicial District of	Court location (number, street, town, zip code)	Docket number
Name of applicant (Last, first, middle initial)	Date of birth (mm/dd/yyyy)	Sex (M/F) Race
Address to which mail is to be sent (number, street)	(Town)	(State) (Zip Code)
Home/residence address* <input type="checkbox"/> Same as mailing address	(Town)	(State) (Zip Code)
Work address*	(Town)	(State) (Zip Code)

**\* NOTE: The home address and/or work address provided above will be included on any orders entered by the court. If you do not wish to provide your home address and/or work address, do not complete these boxes. However, failure to disclose your location information may limit the protection you can receive by the restraining order. If you believe that disclosure of location information would jeopardize you and/or your child(ren)'s health, safety or liberty, you may file a Request For Nondisclosure of Location Information with the Clerk of Court.**

Information About The Respondent			
Name of respondent (Person against whom application is filed) (Last, first, middle initial)	Date of birth (mm/dd/yyyy)	Sex (M/F)	Race
Address of respondent (Number, street)	(Town)	(State)	(Zip Code)
Respondent's telephone number	Other identifiers (Examples include height, weight and approximate age)		
Respondent is ("X" all that apply)			
<input type="checkbox"/> My spouse or a person I have a civil union with	<input type="checkbox"/> My child		
<input type="checkbox"/> My former spouse or a person I had a civil union with	<input type="checkbox"/> A person 18 or over related to me by blood or marriage		
<input type="checkbox"/> Parent of my child	<input type="checkbox"/> A person 16 or over with whom I reside or with whom I have resided		
<input type="checkbox"/> My parent	<input type="checkbox"/> A caretaker who is providing shelter in his or her residence to a person 60 years of age or older		
	<input type="checkbox"/> A person with whom I have (or recently had) a dating relationship		
<input type="checkbox"/> "X" here if you have cohabited with the Respondent as an intimate partner (romantic, spousal, or sexual relationship while living together).			

"X" here if a Protective Order/Restraining Order exists affecting any party to this Application (Enter docket number and court location)

Docket number	Court location
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"X" here if a dissolution of marriage (divorce), dissolution of civil union, custody or visitation action exists involving the same parties. (Enter docket number and court location)

Docket number	Court location
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Name of applicant	Name of respondent	Docket number
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### Application For Relief From Abuse

I have been subjected to a continuous threat of present physical pain or physical injury by the Respondent named above as stated more fully in my attached Affidavit.

1. I request that the court order the following conditions: ("X" all that apply)

- CT01  The Respondent not assault, threaten, abuse, harass, follow, interfere with, or stalk me. (CT01)  
 CT03  The Respondent stay away from my home or wherever I shall reside. (CT03)  
 CT05  The Respondent not contact me in any manner, including by written, electronic or telephone contact, and not contact my home, workplace or others with whom the contact would be likely to cause annoyance or alarm to me. (CT05)  
 CT14  The Respondent may return to the home one time with police to retrieve belongings. (CT14)  
 CT16  The Respondent stay 100 yards away from me. (CT16)  
 CT19  That the order protect my minor children. (CT19)

Name (Last, first, middle initial)	Date of birth (mm/dd/yyyy)	Relationship to me
_____	_____	_____
_____	_____	_____
_____	_____	_____

CT31  That the order protect animals owned or kept by me. (CT31)

2. I request that the court make the following temporary child custody and visitation orders:

CT20  Award me temporary custody of the following minor child(ren) who is (are) also the child(ren) of the Respondent.

	Name (Last, first, middle initial)	Sex (M/F)	Date of birth (mm/dd/yyyy)
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

	Name (Last, first, middle initial)	Sex (M/F)	Date of birth (mm/dd/yyyy)
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____

CT21  With visitation as follows:

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

CT22  Without visitation rights to the Respondent.

3. I request that the court order the following: (further order)

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

### Request For Ex Parte (Immediate) Relief ("X" if applicable)

4. I request that the court order Ex Parte (immediate) relief because I believe there is an immediate and present physical danger to me and / or my minor children and / or animals owned or kept by me.

Signed (Applicant) ▶	Subscribed and sworn to before me:	Signed (Clerk, Notary, Commissioner of Superior Court)	Date signed
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Optional to applicant (If you choose to answer, "X" the appropriate boxes below)

1. Does the respondent hold a permit to carry a pistol or revolver?.....  Yes  No  Unknown  
 2. Does the respondent possess one or more firearms?.....  Yes  No  Unknown

If you think you need more security when you are in court for your relief from abuse hearing, contact the Clerk's Office or the Court Service Center in the court where your hearing is scheduled