

STATE OF ILLINOIS)
)SS
COUNTY OF WILL)

**IN THE CIRCUIT COURT OF THE TWELFTH JUDICIAL CIRCUIT
WILL COUNTY, ILLINOIS**

Petitioner(s)

VS

**CASE
NO.** _____

Respondent(s)

**PETITION FOR EMERGENCY ORDER OF PROTECTION
AND PLENARY ORDER OF PROTECTION**

Petitioner, _____ on his/her own behalf
and/or on behalf of _____ [minor child(ren), and /or
others] requests this court to issue an Order of Protection and states:

1. There (is) (is not) another action pending between the parties in the Circuit Court of _____ County known as
Case No. _____. There (has) (has not) been a previous order of protection involving the same parties.

2. Petitioner resides at _____, City of _____
County of _____, State of Illinois. Note: If disclosure of address is excused under law, give address to which notices may be
sent: _____, City of _____.

3. Respondent resides at _____, City of _____,
County of _____, State of Illinois.

4. Respondent stands in the following relationship to the Petitioner:

- Spouse
- Former Spouse
- Parent(s)
- Child/Stepchild
- Dating Relationship
- Engagement Relationship
- Shares a common household
- Formerly shared a common household
- Have or allegedly have child in common
- Person with disabilities and personal assistant
- Other person related by blood or present or prior marriage
- Share or allegedly share blood relationship through a child

5. VENUE: Petitioner resides in Will County Illinois. Respondent resides in Will County. The alleged abuse occurred in Will County.
 Petitioner is temporarily located in Will County, Illinois to avoid further abuse and could not obtain safe and adequate temporary housing in the county
of Petitioner's residence.

6. DETAILS OF ABUSE: On or about _____, 20__ at _____, City
of _____, County of _____, State of Illinois. Respondent did the following acts that amount to abuse: _____

7. PREVIOUS ABUSE.- Has there been previous abuse by Respondent? (Yes) (No) - If so, describe when it happened and what happened:

8. REMEDIES REQUESTED:

- A. Respondent refrain from:
- | | |
|---|---|
| <input type="checkbox"/> Intimidation of a dependent | <input type="checkbox"/> Harassment |
| <input type="checkbox"/> Willful deprivation | <input type="checkbox"/> Physical Abuse |
| <input type="checkbox"/> Interference with personal liberty | <input type="checkbox"/> Neglect |
| <input type="checkbox"/> Exploitation | <input type="checkbox"/> Stalking |
- B. Petitioner be granted exclusive possession of the residence located at _____
City of _____ County of _____, State of Illinois. (This will not affect title of property).
- C. Respondent be prohibited from entering or remaining present at the school or place of employment of person(s) for whom protection is sought. Location of school is: _____ Location of place of employment is: _____ or at: _____
- D. Respondent be ordered to stay away from Petitioner or any other protected person named in the Order of Protection as follows:
G in person **G** by telephone
- E. Respondent be prohibited from removing or concealing the minor child(ren) from the State of Illinois or from concealing the minor child(ren) within the State.
- F. Respondent be ordered to appear with the minor child(ren) for further hearing at a date and a time set by the Court.
- G. Respondent be ordered [to return the minor child(ren) to] [not to remove the minor child(ren) from] the physical care of _____

- H. Award physical care of the following children to Petitioner.

1. Deny Visitation
 2. Award specified visitation as follows: _____

- I. Award possession (not ownership) of the described property to Petitioner, which property is either solely owned by Petitioner or jointly owned by Petitioner and Respondent _____

- J. Order Respondent, who has possession of the following described property to promptly turn over possession of this property to Petitioner: _____

- K. Respondent be forbidden from taking, transferring, encumbering, concealing, damaging or otherwise disposing of any property.
- L. Petitioner requests child support and/or maintenance. (Note: This relief is not available in Emergency Orders of Protection.)

___ M. Respondent undergo counseling for a specified duration with a social worker, psychologist, psychiatrist, family service agency, alcohol or substance abuse program, mental health center guidance counselor, agency providing, services of elders, programs designed for domestic violence abusers or any other guidance service the Court deems appropriate. (Note: This relief is not available in Emergency Orders of Protection.)

___ O. Respondent be directed to pay the Petitioner for losses suffered as a direct result of the abuse, which shall include but not be limited to medical expenses, lost earnings or other support, repair or replacement of property damaged or taken, reasonable attorney's fees, court costs, and moving or other travel expenses, including additional reasonable expenses for temporary shelter and restaurant meals. (Note: This relief is not available in Emergency Orders of Protection.)

9. Should Petitioner be required to give prior notice to the named Respondent of his/her attempt to obtain judicial relief as to any remedy requested in this petition, the irreparable injury which that remedy seeks to prevent would be likely to occur.

10. The following additional relief is requested to be issued concerning Respondent: _____

WHEREFORE Petitioner requests that an Emergency Order of Protection be issued against Respondent and the relief sought in this petition be granted.

DATED: _____, 20_____

(Signature of Petitioners)

VERIFICATION

Under penalties 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 on information and belief, and as to such matters, the undersigned certifies as aforesaid that he/she believes the same to be true.

(Signature of Petitioners)

Preparer Information:

Name: _____

Attorney For: _____

ARDC#: _____

Address: _____

Telephone Number: _____