

WARNING!

This form may only be used in Protection from Abuse cases.

The Family Court of the State of Delaware

In and For  New Castle  Kent  Sussex County

**AFFIDAVIT FOR EMERGENCY EX PARTE ORDER**

**Protection from Abuse**

|  |
| --- |
| File Number |
|  |
| Petition Number |
|  |

|  |  |
| --- | --- |
| **Movant** | **Respondent** |
| Name: | Name: |

|  |  |  |  |
| --- | --- | --- | --- |
| I, the undersigned movant, being duly sworn according to law, do hereby attest to the truth of the allegations | | | |
| made in the underlying petition. I request that an Emergency Ex Parte Order be issued without notice to | | | |
| the Respondent. | | | |
| 1. Notice to the Respondent: | | | |
|  | a. I have made the following efforts to give notice to the respondent: | |  |
|  |  | | |
|  |  | | |
|  |  | | |
|  | **OR** | | |
|  | b. Notice should not be required because: |  | |
|  |  | | |
|  |  | | |
|  |  | | |
| 2. I request the following specific relief: | | | |
|  |  | | |
|  |  | | |
|  |  | | |
|  |  | | |
| 3. I further attest that unless relief is granted on an ex parte basis, the following **immediate and present** | | | |
| **danger** of domestic violence exists: | | | |
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|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | Petitioner’s Signature | | | | | | | |
| Sworn to subscribed before me this |  | day of | |  | , |  | | |  | |
|  | | | | | | | | | | |
|  | | | Clerk of Court/ Notary Public | | | |  | Date | |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| The Court has reviewed the Petitioner’s Application and has questioned the Petitioner under oath. Petitioner’s Application is hereby: | | | | | | | |
|  |  | Disapproved. Return to case processing for: | | | | | |
|  |  |  | Normal Scheduling of a hearing before | | | | |
|  |  |  |  | at |  | on |  |
|  |  |  | Expedited Scheduling of a hearing before | | | | |
|  |  |  |  | at |  | on |  |
|  |  | Approved. Ex Parte Order attached. | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| So Ordered this Date: |  |  |  |
|  | | | Commissioner/Judge |