F.C.A.§§ 430, 446, 453-460, 550, 551, 655, 656, 828, 842, 842-a, 846, 846-a, 1029, 1056, 1072

FAMILY COURT OF THE STATE OF NEW YORK COUNTY OF

.....

In the Matter of a Proceeding under Article ______ of the Family Court Act

Petitioner,

Docket No.

General Form 8

(Petition-Violation of

Order of Protection) 3/2018

- against-

PETITION (Violation of Order of Protection)

Respondent.

.....

□ <u>WARNING</u>: THE PURPOSE OF THE HEARING REQUESTED IN THIS PETITION IS TO PUNISH [Specify name] FOR CONTEMPT OF COURT, WHICH MAY INCLUDE SANCTIONS OF A FINE OR IMPRISONMENT OR BOTH. YOUR FAILURE TO APPEAR IN COURT MAY RESULT IN YOUR IMMEDIATE ARREST AND IMPRISONMENT FOR CONTEMPT OF COURT.

TO THE FAMILY COURT:

The undersigned D Petitioner D Respondent respectfully shows that:

1. a. Petitioner,, [check applicable box]: □ resides □ islocated at [specify address or indicate if ordered to be kept confidential pursuant to Family Court Act§154-b(2) or Domestic Relations Law §254]:

b. Respondent, , [check applicable box]: \Box resides \Box is located at [specify address or indicate if ordered to be confidential, pursuant to Family Court Act §154-b(2) or Domestic Relations Law §254]:

2. By Order of this Court, dated , , , the □ Petitioner □ Respondent was directed to observe the following conditions of behavior:

3. (Upon information and belief) \Box Petitioner \Box Respondent has failed to obey the Order of this Court in that [specify, including date(s), description(s) and location(s)]:

4. The following child(ren) is/are the subject(s) of the proceeding resulting in the issuance of the Order alleged to have been violated:

General Form 8 page 2

Name Date of Birth

.

Address¹

5. No previous application has been made to any court or judge for the relief herein requested (except [specify]:

WHEREFORE, D Petitioner D Respondent requests that the D Petitioner D Respondent be dealt with, in accordance with Section of the Family Court Act.

Dated:

Signature of \Box Petitioner \Box Respondent

Print or type name

Signature of Attorney, if any

Attorney's Name (Print or Type)

Attorney's Address and Telephone Number

VERIFICATION

STATE OF NEW YORK)):ss: COUNTY OF)

being duly sworn, says that (s)he is the \Box Petitioner \Box Respondent in the above named proceeding and that the foregoing petition is true to (his)(her) own knowledge, except as to matters therein stated to be alleged on information and belief and as to those matters (s)he believes it to be true.

□ Petitioner □ Respondent

Sworn to before me this day of

(Deputy) Clerk of the Court Notary Public

¹Unless the Court has ordered the address to be confidential on the ground that disclosure would pose an unreasonable health or safety risk. *See* Family Court Act§154-b; Form 21, 21a (on-line at <u>www.nycourts.gov).</u>.