

Case No. _____
Dept. No. _____

**IN THE JUSTICE COURT OF LAS VEGAS TOWNSHIP
COUNTY OF CLARK, STATE OF NEVADA**

_____,)
Employer,) **APPLICATION FOR TEMPORARY**
) **ORDER FOR PROTECTION AGAINST**
vs.) **HARASSMENT IN THE WORKPLACE**
) **(NRS 33.250)**
_____,)
Adverse Party.)

(NOTE: There can only be one Adverse Party.)

HARASSMENT IN THE WORKPLACE— Under NRS 33.240, harassment in the workplace occurs when:

- 1. A person knowingly threatens to cause or commits an act that causes:**
 - (a) Bodily injury to himself or another person;**
 - (b) Damage to the property of another person; or**
 - (c) Substantial harm to the physical or mental health or safety of a person;**
- 2. The threat is made or the act is committed against an employer, an employee of the employer while the employee performs his duties of employment or a person present at the workplace of the employer; and**
- 3. The threat would cause a reasonable person to fear that the threat will be carried out or the act would cause a reasonable person to feel terrorized, frightened, intimidated or harassed.**

PLEASE PRINT CLEARLY

COMPLETE THE APPLICATION TO THE BEST OF YOUR KNOWLEDGE.

I state the following facts under penalty of perjury:

- I am the employer.
- I am the authorized agent of the employer.

1 I am not the employer or authorized agent of the employer. (If this box is
2 checked, you may not file this form.)

3 I reasonably believe that the Adverse Party has threatened or committed an act or act(s) of
4 harassment in the workplace as defined above. The event(s) occurred as follows:

5 **NOTE: BE SPECIFIC AS TO WHO THREATENED OR COMMITTED WHAT ACT OR**
6 **ACTS AND AGAINST WHOM. INDICATE APPROXIMATE DATE(S) AND**
7 **LOCATION(S). ALSO LIST SPECIFIC EMPLOYEE(S)/PERSON(S) PRESENT AT THE**
8 **WORKPLACE WHO ARE THE FOCUS OF THE HARASSMENT OR WHOM THE**
9 **ADVERSE PARTY SHOULD BE DIRECTED NOT TO CONTACT.**

10 **THIS FORM IS A PUBLIC RECORD**

11 _____

12 _____

13 _____

14 _____

15 _____

16 _____

17 _____

18 _____

19 _____

20 _____

21 _____

22 _____

23 **NOTE: PLEASE DO NOT WRITE ON THE BACKS OF ANY PAGES;**
24 **CHECK BOX IF YOU ARE USING ADDITIONAL PAGES.**

25

1 **NOTICE REQUIREMENTS**

2 **(Complete either A or B, not both)**

3 **A. I HAVE given notice of this Application to the Adverse Party by the following**
4 **method(s):**

- 5 In Person E-mail Fax
6 Telephone Overnight Carrier First Class Mail
7 Other: _____

8 Date: _____ Time: _____

9 I have received confirmation that the Adverse Party has received my Application for a
10 Temporary Order for Protection Against Harassment in the Workplace as follows (check
11 all that apply):

- 12 Confirmation of receipt attached (i.e., fax, e-mail, postal mail, etc.)
13 No confirmation received.

14 **B. I HAVE NOT given notice of this Application to the Adverse Party because**
15 immediate and irreparable injury, loss, or damage will result to the employer, an employee of the
16 employer while the employee performs the duties of his employment, or a person who is present
17 at the workplace of the employer, before the matter can be heard on notice. The irreparable
18 injury, loss, or damage that may result is: _____

19 It is irreparable because of:

- 20 Possible economic or property damage which may include the following: _____
21 _____
22 Continuous threat of stalking/harassment
23 Assault/Battery (personal injury)
24 Possible death to specified individuals named in the Application
25 Other: _____

1. What efforts, if any, have been made to give notice to the Adverse Party? _____

2. Facts supporting waiver of notice requirements: _____

1. a) This matter does not have to be reported to law enforcement; however, has a related report ever been filed? Yes No

(Please complete information, if known. You may attach available copies)

Approximate date of report(s): _____

Name(s) of law enforcement agencies: _____

Case number(s): _____

b) For purposes of this form a "TPO Action" is defined to include the following **Justice Court** actions:

- (1) An Order for Protection Against Stalking and Harassment (NRS 200.591);
 - (2) An Order for Protection of Children (NRS 33.400);
 - (3) An Order for Protection Against Harassment in the Workplace (NRS 33.270); and
- a "TPO Action" is also defined to include the following **Family/Justice Court** action:
- (1) An Order for Protection Against Domestic Violence (NRS 33.020)

Please Check the Appropriate Box Below:

In the last 2 years, Applicant has not filed a TPO action against the Adverse Party anywhere in the State of Nevada, and the Adverse Party has not filed a TPO action against Applicant anywhere in the State of Nevada.

In the last 2 years, the following TPO action(s) in the State of Nevada have been filed involving Applicant and the Adverse Party:

Case # (if known)	Court (Justice/Family)	Place of Filing	Approx. Date Filed	Outcome (TPO granted, denied, rescinded, etc.)

2. a) Employer's name (if applicable, dba): _____

b) The workplace is located in, and the employees primarily perform their duties at the following address: _____

Town/City of _____, County of _____, State of _____

Phone #: _____

1 3. **PLEASE CHECK THE APPROPRIATE BOX(ES) BELOW, IF APPLICABLE.**

2 Employee(s) also work at the additional specific locations that need to be enumerated
3 in the order:

4 Street Address: _____

5 Town/City of _____, County of _____, State of _____

6 Phone #: _____

7 Street Address: _____

8 Town/City of _____, County of _____, State of _____

9 Phone #: _____

10 **(If you wish to designate more specific addresses, please list them in this format on a**
11 **separate sheet.)**

12 The employees perform their duties statewide.

13 Other comments on locations where protection is needed: _____

14 _____
15 _____

16 4. Authorized agent for employer: _____

17 5. Phone number for authorized agent: _____

18 6. Is employer represented by an attorney? Yes No

19 Attorney name: _____ Bar #: _____

20 Address: _____

21 Phone # for attorney: _____ Fax # for attorney: _____

22 7. Are there additional safety concerns that the court should know (i.e., firearms, dangerous
23 conditions, hazardous premises, nature of business, etc.)? Yes No

24 If yes, please briefly explain: _____

25 _____

1 8. Have there been any other court actions or any other relationships between the employer
2 and the Adverse Party? Yes No

3 If yes, please describe: _____

4 **RELIEF REQUESTED**

5 I THEREFORE REQUEST that a Temporary Order for Protection Against Harassment in
6 the Workplace be issued against the Adverse Party so that the Adverse Party will be prohibited
7 from contacting, intimidating, threatening, or otherwise interfering with the employer's business
8 and/or its employees and/or any person present at the workplace, and that the Adverse Party will
9 be ordered to stay away from the employer's workplace. I also request that the court prohibit the
10 Adverse Party from violating this order via e-mail, correspondence, telephone, or by an agent.

11 I FURTHER REQUEST the following other conditions: _____

13 I FURTHER REQUEST that this Court set a hearing date for an Extended Order.
14 I request the Court set a hearing as soon as possible.

15 Yes No

16 If yes, complete the Application for Extended Order for Protection Against
17 Harassment in the Workplace. **NOTE: THIS HEARING WILL BE HELD WITHIN
18 TEN (10) JUDICIAL DAYS PURSUANT TO NRS 33.270(6)(c), UNLESS
19 COMPELLING REASONS REQUIRE OTHERWISE.**

19 **DECLARATION**
(NRS 53.045)

20 I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAW OF THE STATE OF
21 NEVADA THAT: (1) I AM THE EMPLOYER OR AUTHORIZED AGENT HEREIN, (2) I
22 HAVE READ THE STATEMENTS CONTAINED HEREIN OR HAVE HAD THEM READ
23 TO ME, (3) I BELIEVE THESE STATEMENTS TO BE TRUE, AND (4) THE REQUESTED
24 ORDER IS NEEDED.

25 **Dated:** _____

SIGNATURE

PRINT NAME