

1 Case No. \_\_\_\_\_

2 Dept. No. \_\_\_\_\_

3  
4 **IN THE JUSTICE COURT OF LAS VEGAS TOWNSHIP**  
5 **COUNTY OF CLARK, STATE OF NEVADA**  
6

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8 \_\_\_\_\_ )  
9 **Applicant(s),** ) **APPLICATION FOR ORDER FOR**  
10 **vs.** ) **PROTECTION AGAINST**  
11 \_\_\_\_\_ ) **SEXUAL ASSAULT**  
12 **Adverse Party(s),** )  
\_\_\_\_\_ )

13  
14 **NRS 200.366. Sexual assault: Definition; penalties.**

15 1. A person who subjects another person to sexual penetration, or who forces  
16 another person to make a sexual penetration on himself or another, or on a beast,  
17 against the will of the victim or under conditions in which the perpetrator knows  
18 or should know that the victim is mentally or physically incapable of resisting or  
19 understanding the nature of his conduct, is guilty of sexual assault. . . .

20  
21 **PLEASE TYPE OR PRINT CLEARLY.**

22 **COMPLETE THE APPLICATION TO THE BEST OF YOUR KNOWLEDGE.**

23 I am applying for protection (check all that apply):

24  For Myself

On behalf of another person(s)

1 Applicant states the following facts under penalty of perjury:

2 I reasonably believe that the Adverse Party has committed the crime of sexual assault  
3 as defined above. The act(s) occurred as follows:  
4

5 ***(NOTE: BE SPECIFIC AS TO WHO COMMITTED WHAT ACT OR ACTS, AGAINST  
6 WHOM, WHEN, WHERE, WHETHER COMMITTED OR THREATENED; INDICATE  
APPROXIMATE DATE(S) AND LOCATION(S).)***

7 **THIS FORM IS A PUBLIC RECORD**

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

22  ***Check if you use a continuation page (to be incorporated by reference)***

23  
24 This matter does not have to be reported to law enforcement; however, has a report ever been  
filed?  Yes  No

25 If yes, approximate date(s):

1 \_\_\_\_\_  
2 Name of law enforcement agency:  
3 \_\_\_\_\_

4 Case/Event number if known:  
5 \_\_\_\_\_

6 **(NOTE: IT IS NOT NECESSARY TO FILE A LAW ENFORCEMENT REPORT,  
7 BUT IF YOU HAVE ONE AVAILABLE, PLEASE ATTACH A COPY OR BRING IT  
8 TO THE COURT HEARING.)**

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

- 11 (1) An Order for Protection Against Stalking and Harassment (NRS 200.591);
- 12 (2) An Order for Protection of Children (NRS 33.400);
- 13 (3) An Order for Protection Against Harassment in the Workplace (NRS 33.270).
- 14 (4) An Order for Protection Against Sexual Assault

15 A "TPO Action" is also defined to include the following **Justice/Family/District**  
16 **Court** action:

- 17 (a) An Order for Protection Against Domestic Violence (NRS 33.020)

18 **Please Check the Appropriate Box Below:**

19  In the last 2 years, Applicant or any party seeking protection has not filed a TPO  
20 action against the Adverse Party anywhere in the State of Nevada, and the Adverse  
21 Party has not filed a TPO action against Applicant or any party seeking protection  
22 anywhere in the State of Nevada.

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

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

26 ***Applicant must be at least 18 years of age. If not 18 years of age, consult with the Clerk.***

27 1. a) Applicant's Name Age  
28 \_\_\_\_\_  
29 (Last) (First) (Middle)

1 b) Applicant's relationship to Adverse Party: \_\_\_\_\_

2  
3 c) Provide names below of those for whom you are seeking protection, including  
4 yourself, minors or household members that need this protection. Indicate the relationships of  
5 all persons listed to yourself and to the Adverse Party (e.g., spouse, intimate partner, friend,  
6 roommate, neighbor, relative, acquaintance, co-worker, stranger):

7

8 NAME	9 AGE	10 RELATIONSHIP TO APPLICANT	11 RELATIONSHIP TO ADVERSE PARTY
		Self (if applicable)	

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16 Explain why protection is needed for the individuals listed above:

17 \_\_\_\_\_  
18 \_\_\_\_\_  
19 \_\_\_\_\_

20 **(NOTE: YOUR APPLICATION WILL NOT BE DENIED BASED UPON A PARTICULAR RELATIONSHIP. HOWEVER, DEPENDING UPON YOUR RELATIONSHIP, YOU MAY ALSO BE ELIGIBLE TO APPLY AT THE FAMILY DIVISION OF THE EIGHTH JUDICIAL DISTRICT COURT FOR AN ORDER OF PROTECTION AGAINST DOMESTIC VIOLENCE, PURSUANT TO NRS CHAPTER 33.)**

23 2. Has the Adverse Party ever lived with any Party listed above?  Yes  No

24 If so, for how long? \_\_\_\_\_

25 3. Is anyone listed above living with the Adverse Party now?  Yes  No

If so, who? \_\_\_\_\_

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4. Date of separation (if applicable): \_\_\_\_\_

5. Are there children involved?  Yes  No If so, how are they involved?  
\_\_\_\_\_  
\_\_\_\_\_

6. Has the Adverse Party ever been involved in any other relevant Court actions (e.g.,  
eviction, divorce, custody, criminal, etc.)?

Yes  No If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Residence(s) where protection is needed:

CONFIDENTIAL (*If confidential, check and move to the next question*) or,  
 If not confidential, list address, city, state and zip code:  
\_\_\_\_\_  
\_\_\_\_\_

8. Place(s) of employment where protection is needed:

CONFIDENTIAL (*If confidential, check and move to the next question*) or,  
 If not confidential, list name, address, city, state and zip code:  
\_\_\_\_\_  
\_\_\_\_\_

9. Location of school(s) where protection is needed:

CONFIDENTIAL (*If confidential, check and move to the next question*) or,  
 If not confidential, list name, address, city, state and zip code:

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 10. Other specific locations frequented where protection is needed (i.e., sports, extra-  
4 curricular activities, church, employment, after-school activities, etc.):

- 5  CONFIDENTIAL (*If confidential, check and move to the next question*) or,  
6  If not confidential, list name, address, city, state and zip code:  
7 \_\_\_\_\_  
8 \_\_\_\_\_

9 11. If there are persons other than those listed on page 4 that the Adverse Party should be  
10 directed not to contact, please name the individuals and explain why these precautions  
11 are needed: \_\_\_\_\_  
12 \_\_\_\_\_

13 12. If there are any other safety concerns that the Court should know (e.g., firearms, etc.),  
14 please briefly explain:  
15 \_\_\_\_\_  
16 \_\_\_\_\_

17  
18 **RELIEF REQUESTED**

19 **THEREFORE, I REQUEST** that a Temporary Order be issued against the Adverse  
20 Party requiring the Adverse Party to refrain from contacting, intimidating, threatening or  
21 otherwise interfering with me and/or other persons identified in this application, either  
22 directly or through an agent.

23 **I FURTHER REQUEST** that the Court require the Adverse Party to stay away from  
24 the places listed above.  
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**I FURTHER REQUEST** the following other conditions:

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**I FURTHER REQUEST** that this Court set a hearing date for an Extended Order as soon as possible.

Yes     No

**(NOTE: IF GRANTED AND SERVED, A TEMPORARY ORDER MAY BE ENFORCED FOR UP TO 30 DAYS, EXCEPT THAT IF AN EXTENDED ORDER IS REQUESTED, THE TEMPORARY ORDER REMAINS IN EFFECT UNTIL THE HEARING ON THE EXTENDED ORDER IS HELD BY THE COURT. IF GRANTED AND SERVED, AN EXTENDED ORDER MAY BE ENFORCED FOR UP TO ONE YEAR.)**

**I ACKNOWLEDGE** that an Extended Order may only be granted after notice of the petition for the Order and of the Hearing thereon is served upon the Adverse Party pursuant to the Rules of Civil Procedure, and a hearing is held on the petition.

**DECLARATION**  
**(NRS 53.045)**

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

Dated: \_\_\_\_\_

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
PRINT NAME