

# INSTRUCTIONS FOR DOMESTIC VIOLENCE FORMS

## FORMS YOU NEED TO FILL OUT:

### I. Complaint And Motion For Domestic Violence Protective Order (AOC-CV-303)

1. You will need three (3) copies of this form.
2. Fill in:
  - (a) Name of county;
  - (b) Plaintiff's name - you are the plaintiff;
  - (c) Defendant's name and address - a defendant is a spouse, former spouse, person of the opposite sex with whom you live or have lived as if married, your child or grandchild who is at least 16 years old, the mother or father of your child, a current or former household member, or a person of the opposite sex that you are dating or have dated;
  - (d) Check the blocks and fill in the blanks that apply to you. If you are afraid of additional acts of domestic violence and you want the judge/magistrate to act immediately, check block #2 at the bottom of page 2, asking for an Ex Parte Order. A request for an Ex Parte Order will be heard soon and without giving notice to the defendant. If a magistrate hears your request for ex parte relief, the magistrate's order is only good for a short period of time and a second temporary Ex Parte Order must be issued by the judge. If the judge issues the temporary Ex Parte Order, another hearing will be held after the defendant is given notice. If no Ex Parte Order is entered, a hearing will still be held after the defendant is given notice;
  - (e) Date and sign the complaint on the back (*above the verification section*). The verification must be signed before a clerk or notary;
  - (f) In some counties you may be able to take it to the magistrate's office on weekends and evenings.
3. If you or the defendant is under the age of eighteen (18) and not married, you must ask the clerk for the form to appoint a guardian ad litem (AOC-CV-318).

### II. Notice Of Hearing On Domestic Violence Protective Order (AOC-CV-305)

1. You will need three (3) copies of this form.
2. Fill in:
  - (a) Name of county;
  - (b) Plaintiff's name;
  - (c) Defendant's name and address.
3. **DO NOT** fill out the remainder of this form.

### III. Ex Parte Domestic Violence Order Of Protection (AOC-CV-304)

1. You will need only one (1) copy of this form.
2. Fill in:
  - (a) Name of county;
  - (b) Plaintiff's name;
  - (c) Defendant's name and address.
3. **DO NOT** fill out the remainder of this form.

### IV. Civil Summons Domestic Violence (AOC-CV-317)

1. You will need three (3) copies of this form.
2. Fill in:
  - (a) Name of county;
  - (b) Plaintiff's name and address. You may give an address where you want your mail to go, not necessarily where you are staying;
  - (c) Defendant's name and address (*under the block designated "Defendant"*);
  - (d) Defendant's name and address again in the block designated "Name and Address of Defendant."
3. **DO NOT** fill out the remainder of this form.

(Over)

V. Identifying information About Defendant Domestic Violence Action (AOC-CV-312)

1. You will need only one (1) copy of this form.
2. Fill in all the information that you know. Be as complete and accurate as you can.
3. Leave blank any portion for which you do not have the information.
4. You may either:
  - (a) turn in the completed form to the clerk or magistrate with the other papers, or
  - (b) keep the form, get the needed information, and turn in the completed form to the judge or magistrate at the hearing.

VI. Affidavit As To Status Of Minor Child (AOC-CV-609)

1. You **do not** need this form unless you are asking for temporary custody of the children.
2. You will need one (1) copy of this form for each minor child.
3. You must attach the completed form to the Complaint and give it to the clerk or magistrate with the other papers:
  - (a) turn in the completed form to the clerk or magistrate with the other papers, or
  - (b) keep the form, get the needed information, and turn in the completed form to the judge or magistrate at the hearing.

**TAKE ALL FORMS TO THE CLERK/MAGISTRATE FOR FURTHER DIRECTIONS.**

County

In The General Court Of Justice  
District Court Division

Name Of Plaintiff (Person Filing Complaint)

VERSUS

Name And Address Of Defendant (Person Accused Of Abuse)

COMPLAINT AND MOTION  
FOR  
DOMESTIC VIOLENCE  
PROTECTIVE ORDER

G.S. 50B-1, -2, -3, -4

(Check only boxes that apply and fill in blanks. Additional sheets may be attached.)

- 1. I live in \_\_\_\_\_ County, North Carolina.
- 2. The defendant and I  are spouses.  are former spouses.  
 are persons of the opposite sex who are not married but live together or have lived together.  
 have a child in common.  
 are parent and child or grandparent and grandchild.  
 are current or former household members.  
 are persons of the opposite sex who are in or have been in a dating relationship.
- 3. There  is  is not another court proceeding between the defendant and me pending in this or any other state. (List county, state, date, and what kind of proceeding, if applicable.)
- 4. The defendant has attempted to cause or has intentionally caused me bodily injury; or has placed me or a member of my family or household in fear of imminent serious bodily injury or in fear of continued harassment that rises to such a level as to inflict substantial emotional distress; or has committed a sexual offense against me in that: (Give specific dates and describe in detail what happened.)
- 5. The defendant has attempted to cause or has intentionally caused bodily injury to the child(ren) living with me or in my custody; has placed my child(ren) in fear of imminent serious bodily injury or in fear of continued harassment that rises to such a level as to inflict substantial emotional distress; or has committed a sexual offense against the child(ren) in that: (Give specific dates and describe in detail what happened.)
- 6. I believe there is danger of serious and immediate injury to me or my child(ren).
- 7. (Check this block if you ask for temporary child custody.) The defendant and I are the parents of the following child(ren) under the age of eighteen.

A COPY OF "AFFIDAVIT AS TO STATUS OF MINOR CHILD" (AOC-CV-609) MUST BE ATTACHED FOR EACH CHILD.

Name	Sex	Date Of Birth	Name	Sex	Date Of Birth

(Over)

8. (Fill in the block if you are asking for temporary child custody) The minor child(ren) listed in No 7. above is exposed to a substantial risk of physical or emotional injury or sexual abuse in that: (Describe in detail what happened that created a risk of physical or emotional injury or sexual abuse.)
9. The defendant has firearms and ammunition as described below,  has a permit to purchase a firearm,  and has a permit to carry a concealed weapon. (Describe all firearms, ammunition, gun permits and give identifying number(s) if known, and indicate where defendant keeps firearms and gun permits.)
10. The defendant has used or threatened to use a deadly weapon against me or minor child(ren) in my custody or has a pattern of prior conduct involving the use or threatened use of violence with a firearm against any persons in that (Give specific dates and describe in detail what happened.)
11. The defendant has made threats to commit suicide in that (Give specific dates and describe in detail what happened.)

**Because Of The Acts Of Domestic Violence By The Defendant, I Am Requesting That The Court Give Me The Following Relief:**

(Check only boxes that apply.)

1. I want emergency relief.
2. Since there is a danger of acts of domestic violence against me or my child(ren), I want an Ex Parte Order before notice of a hearing is given to the defendant.
3. I want the Court to order the defendant not to assault, threaten, abuse, follow, harass or interfere with me and my child(ren).
- 3a. I want the defendant ordered not to cruelly treat or abuse an animal owned, possessed, kept, or held as a pet by either party or minor child residing in the household.
4. I want possession of our residence at the address listed below, and I want the defendant to move from and not return to the residence.
- Address Of Residence
5. I want the Court to order the eviction of the defendant from the residence listed above and I want assistance in returning to the residence.
6. I want possession of the personal property such as clothing and household goods in the residence listed above except for the defendant's personal clothing, toiletries and tools of trade.
- 6a. I want the care, custody, and control of any animal owned, possessed, kept, or held as a pet by either party or minor child residing in the household granted to me.

VERSUS

File No.

Name Of Defendant

7. I want the defendant to be ordered not to come on or about:
- |  |  |
|--|--|
| <input type="checkbox"/> (a) my residence.                                     | <input type="checkbox"/> (b) any place where I am receiving temporary shelter. |
| <input type="checkbox"/> (c) the place where I work.                           | <input type="checkbox"/> (d) any school(s) the child(ren) attend.              |
| <input type="checkbox"/> (e) the place where the child(ren) receives day care. | <input type="checkbox"/> (f) the place where I go to school.                   |
| <input type="checkbox"/> (g) Other: (name other places)                        |  |

The child(ren) currently attend: (name school)

8. I want the defendant to be ordered to have no contact with me.

9. I want possession and use of the following vehicle:

Describe Vehicle

10. I want temporary custody of our minor child(ren) listed in this Complaint. I understand that I must file a separate child custody action for permanent custody.
11. I want the defendant to be ordered to make payments for the support of our minor child(ren), as required by law, but I understand it is only temporary and that I must file a separate child support action for regular, permanent child support.
12. I want the Court to prohibit the defendant from possessing or purchasing a firearm.
13. I want the Court to order the defendant to surrender to the sheriff his/her firearms, ammunition, and gun permits to purchase a firearm and carry a concealed weapon.
14. I want the defendant to be ordered to attend an abuser treatment program.
15. I want the defendant to be ordered to provide me and the child(ren) suitable alternative housing.
16. I want the defendant to be ordered to make payments for my support as required by law, but I understand it is only temporary and that I must file a separate action for regular permanent spousal support.
17. Other: (specify)

Date

Signature Of Plaintiff (Person Filing Complaint)

VERIFICATION

I, the undersigned, being first duly sworn, say that I am the plaintiff in this action; that I have read the Complaint and Motion; that the matters and things alleged in the Complaint and Motion are true except as to those things alleged upon information and belief and as to those I believe them to be true and accurate.

SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME

Date

Date

Signature

Signature Of Plaintiff (Person Filing Complaint)

- Deputy CSC  
 Assistant CSC

- Clerk of Superior Court  
 Designated Magistrate

Name Of Plaintiff (Type Or Print)

Notary

Date My Commission Expires

SEAL

County Where Notarized

STATE OF NORTH CAROLINA

File No.

County

In The General Court Of Justice
District Court Division

Name Of Defendant
Street Address Of Defendant (Not P.O. Box)
City State Zip

IDENTIFYING INFORMATION ABOUT DEFENDANT DOMESTIC VIOLENCE ACTION

G.S. 50B-3(d)

INSTRUCTIONS: In order to assist law enforcement agencies in serving and enforcing this Order, if issued by the Court, the following information is requested. It is not required for the issuance of this Order, but may allow law enforcement agencies to locate and more quickly identify the persons involved in this case and to enforce the provisions of this Order more effectively. Answer these questions accurately and honestly.

If you do not know the answer to any of the following questions, leave the question blank.

INFORMATION ABOUT DEFENDANT

Date Of Birth
Race: White Black Indian Asian/Pacific Islander Other
Sex: Male Female
Height Weight Hair Color Eye Color

Identifying Marks (List any marks, scars, tattoos)

Does the defendant have a driver's license or state-issued identification card from any state?
If yes, provide the state and number if possible: State: Number:
Vehicle description and license plate number:

Social Security No. Of Defendant
Telephone No. Of Defendant

The defendant's current work information:

Employer's Business Name
Business Address
Business Telephone No.
Defendant's Work Hours (List Work Start Time And Work Stop Time)

Does the defendant have a permit to purchase a handgun or crossbow?
If yes, state which law enforcement agency issued the permit, if known:

Does the defendant have a permit to carry a concealed handgun?
If yes, state which law enforcement agency issued the permit, if known:

Is there any reason that a law enforcement officer should consider the defendant a potential threat (i.e., carries concealed weapons while drinking alcohol, has threatened an officer, etc.)?

If yes, specify the circumstances:

PLAINTIFF

Date Of Birth
Race: White Black Indian Asian/Pacific Islander Other
Sex: Male Female
Date Name Of Plaintiff (Type Or Print) Signature Of Plaintiff

NOTE TO CLERK OR MAGISTRATE: If an order is issued, a copy of this form should be attached to the appropriate order and forwarded to the sheriff of the issuing court county.

**STATE OF NORTH CAROLINA**

File No.

\_\_\_\_\_ County

In The General Court Of Justice

Name And Address Of Plaintiff

**VERSUS**

Name And Address Of Defendant

**SERVICEMEMBERS CIVIL RELIEF ACT  
AFFIDAVIT**

G.S. Ch. 127B, Art. 4; 50 U.S.C. 3901 to 4043

**NOTE:** Though this form may be used in a Chapter 45 Foreclosure action, it is not a substitute for the certification that may be required by G.S. 45-21.12A.

**AFFIDAVIT**

**I, the undersigned Affiant, under penalty of perjury declare the following to be true:**

1. As of the current date: *(check one of the following)*

- a. I have personal knowledge that the defendant named above is in military service.\*
- b. I have personal knowledge that the defendant named above is **not** in military service.\*
- c. I am unable to determine whether the defendant named above is in military service.\*

2. *(check one of the following)*

- a. I used the Servicemembers Civil Relief Act Website (<https://scra.dmdc.osd.mil/>) to determine the defendant's military status.
  - The results from my use of that website are attached.

**(NOTE:** The Servicemembers Civil Relief Act Website is a website maintained by the Department of Defense (DoD). If DoD security certificates are not installed on your computer, you may experience security alerts from your internet browser when you attempt to access the website.)
- b. I have not used the Servicemembers Civil Relief Act Website and the following facts support my statement as to the defendant's military service: *(State how you know the defendant is or is not in the military. Be specific.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*NOTE:** The term "military service" includes the following: active duty service as a member of the United States Army, Navy, Air Force, Marine Corps, or Coast Guard; service as a member of the National Guard under a call to active service authorized by the President or the Secretary of Defense for a period of more than 30 consecutive days for purposes of responding to a national emergency; active service as a commissioned officer of the Public Health Service or of the National Oceanic and Atmospheric Administration; any period of service during which a servicemember is absent from duty on account of sickness, wounds, leave, or other lawful cause. 50 U.S.C. 3911(2). The term "military service" also includes the following: State active duty as a member of the North Carolina National Guard under an order of the Governor pursuant to Chapter 127A of the General Statutes, for a period of more than 30 consecutive days; service as a member of the National Guard of another state under an order of the governor of that state that is similar to State active duty, for a period of more than 30 consecutive days. G.S. 127B-27(3).

**SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME**

Date

Date

Signature Of Affiant

Signature Of Person Authorized To Administer Oaths

Name Of Affiant (type or print)

- Deputy CSC
- Assistant CSC
- Clerk Of Superior Court
- Magistrate

**SEAL**

Notary

Date My Commission Expires

**NOTE TO COURT:** Do not proceed to enter judgment in a non-criminal case in which the defendant has not made an appearance until a Servicemembers Civil Relief Act affidavit (whether on this form or not) has been filed, and if it appears that the defendant is in military service, do not proceed to enter judgment until such time that you have appointed an attorney to represent him or her.

## Information About Servicemembers Civil Relief Act Affidavits

### 1. Plaintiff to file affidavit

In any civil action or proceeding, including any child custody proceeding, in which the defendant does not make an appearance, the court, before entering judgment for the plaintiff, shall require the plaintiff to file with the court an affidavit—

- (A) stating whether or not the defendant is in military service and showing necessary facts to support the affidavit; or
- (B) if the plaintiff is unable to determine whether or not the defendant is in military service, stating that the plaintiff is unable to determine whether or not the defendant is in military service.

50 U.S.C. 3931(b)(1).

### 2. Appointment of attorney to represent defendant in military service

If in a civil action or proceeding in which the defendant does not make an appearance it appears that the defendant is in military service, the court may not enter a judgment until after the court appoints an attorney to represent the defendant. If an attorney appointed to represent a service member cannot locate the service member, actions by the attorney in the case shall not waive any defense of the service member or otherwise bind the service member. 50 U.S.C. 3931(b)(2).

State funds are not available to pay attorneys appointed pursuant to the Servicemembers Civil Relief Act. To comply with the federal Violence Against Women Act and in consideration of G.S. 50B-2(a), 50C-2(b), and 50D-2(b), plaintiffs in Chapter 50B, Chapter 50C, and Chapter 50D proceedings should not be required to pay the costs of attorneys appointed pursuant to the Servicemembers Civil Relief Act. Plaintiffs in other types of actions and proceedings may be required to pay the costs of attorneys appointed pursuant to the Servicemembers Civil Relief Act. The allowance or disallowance of the ordering of costs will require a case-specific analysis.

### 3. Defendant's military status not ascertained by affidavit

If based upon the affidavits filed in such an action, the court is unable to determine whether the defendant is in military service, the court, before entering judgment, may require the plaintiff to file a bond in an amount approved by the court. If the defendant is later found to be in military service, the bond shall be available to indemnify the defendant against any loss or damage the defendant may suffer by reason of any judgment for the plaintiff against the defendant, should the judgment be set aside in whole or in part. The bond shall remain in effect until expiration of the time for appeal and setting aside of a judgment under applicable Federal or State law or regulation or under any applicable ordinance of a political subdivision of a State. The court may issue such orders or enter such judgments as the court determines necessary to protect the rights of the defendant under this Act. 50 U.S.C. 3931(b)(3).

### 4. Satisfaction of requirement for affidavit

The requirement for an affidavit above may be satisfied by a statement, declaration, verification, or certificate, in writing, subscribed and certified or declared to be true under penalty of perjury. 50 U.S.C. 3931(b)(4). The presiding judicial official will determine whether the submitted affidavit is sufficient.

### 5. Penalty for making or using false affidavit

A person who makes or uses an affidavit permitted under 50 U.S.C. 3931(b) (or a statement, declaration, verification, or certificate as authorized under 50 U.S.C. 3931(b)(4)) knowing it to be false, shall be fined as provided in title 18, United States Code, or imprisoned for not more than one year, or both. 50 U.S.C. 3931(c).



# STATE OF NORTH CAROLINA

Court File No.

\_\_\_\_\_ County

In The General Court Of Justice  
District Court Division

Name And Address Of Plaintiff

## AFFIDAVIT AS TO STATUS OF MINOR CHILD

**VERSUS**

G.S. 50A-209

Name And Address Of Defendant

Name Of Minor Child

Date Of Birth

Birthplace

I, the undersigned affiant, being first duly sworn, say that during the past five (5) years the above named minor child has lived as follows:

Period Of Residence		Address	Name Of Person Lived With	Present Address Of Person
From	To			
	<b>Present</b>			

I further say that: (Check those that apply)

I have participated in litigation concerning the custody of the above named child.

Capacity As Participant

Name And Address Of Court

Date Of Child Custody Determination

Case No.

Details

I have information about a custody proceeding. Examples of custody proceeding include divorce, proceeding related to domestic violence, a protective order, termination of parental rights or adoption that is pending in a court of this or another state and could affect this proceeding.

Name And Address Of Court

Details (include case number and describe nature of the proceeding)

I know of a person as listed below, who has physical custody or claims to have custody or visitation rights with respect to the above named child.

Name And Address Of Person

Physical Custody

Claimed Custody

Visitation Rights

**SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME**

Date

Date

Signature Of Person Authorized To Administer Oaths

Signature Of Affiant

Deputy CSC  Assistant CSC  Clerk Of Superior Court  Magistrate

Name Of Affiant (type or print)

Notary

Date My Commission Expires

Relationship To Above Named Child

**SEAL**

County Where Notarized

STATE OF NORTH CAROLINA

File No.

\_\_\_\_\_ County

In The General Court Of Justice  
District Court Division

Name Of Plaintiff

VERSUS

Name Of Defendant

**APPLICATION AND ORDER  
TO APPOINT GUARDIAN AD LITEM  
IN ACTION FOR  
DOMESTIC VIOLENCE PROTECTIVE ORDER**

G.S. 1A-1, Rule 17

**APPLICATION FOR APPOINTMENT**

The  plaintiff  defendant in this action seeking a domestic violence protective order is a person under eighteen (18) years of age who has no general guardian. The court is requested to appoint a guardian ad litem for the  plaintiff  defendant. The undersigned applicant recommends that the court appoint the following person as guardian ad litem.

Name Of Person Recommended As Guardian Ad Litem

Date

Relationship Of Proposed Guardian Ad Litem To Plaintiff/Defendant

Applicant

**ORDER OF APPOINTMENT**

Pursuant to the authority contained in G.S. 1A-1, Rule 17 and:

- in response to the written application above
- on the court's own motion

the person named below is appointed as guardian ad litem for \_\_\_\_\_ (name minor), a minor for the purpose of:

- appearing on behalf of the minor plaintiff in the above-captioned action for a domestic violence protective order.
- defending on behalf of the minor defendant in the above-captioned action for a domestic violence protective order.

Name And Address Of Guardian Ad Litem

Date

Signature

- Assistant CSC
- Magistrate (if authorized to enter ex parte order)
- Clerk Of Superior Court
- District Court Judge