Name

Address (omit if safeguarded)

City, State, Zip (omit if safeguarded)

Phone (omit if safeguarded)

Email (omit if safeguarded)

I am [ ] Petitioner [ ] Petitioner's Attorney (Utah Bar #:_____)

In the District Court of Utah

_____ Judicial District _____ County

Court Address _____

_____ Petitioner (name of business asking for protection) v. _____ Respondent	**Petition for Workplace Violence Protective Order** (Utah Code 78B-7-1102 and 1103) _____ Case Number _____ Judge _____ Commissioner

1. Who is the petitioner (name of business asking for the protective order)?

Name of business or organization	
Name and title of representative of business or organization	

What is your address, phone number, and email address? (to keep private, leave blank and attach a Request to Safeguard Contact Information from Other Parties)

_____ _____
Street City, State, ZIP Code

_____ _____
Phone (xxx-xxx-xxxx) Email address

If you have an attorney, what is their name, phone number, and email address?

Name:

_____

_____ _____

Phone (xxx-xxx-xxxx) Email address

The business or organization is an employer. I am either the sole proprietor or am authorized to seek this Workplace Violence Protective Order on behalf of the business or organization.

2. Who is the respondent (person you need to be protected from)?

First name:	
Middle name or initial (if any):	
Last name:	

What is their date of birth? (Choose one)(required)

[ ] Their date of birth is (mm/dd/yyyy):

_____

[ ] I don't know. My best guess is (mm/dd/yyyy):

_____

What is their social security number? (xxx-xx-xxxx):

_____

What is their ethnicity? (Choose one.)(required)

[ ] Of Hispanic, Latino/a/x, or Spanish origin

[ ] Not of Hispanic, Latino/a/x, or Spanish origin

[ ] Prefer not to answer

What is their race? (Choose one.)(required)

[ ] American Indian or Alaska Native

[ ] Asian (Central/East/South/ Southeast)

[ ] Black or African American

[ ] Native Hawaiian or Other Pacific Islander

[ ] White

[ ] Another race, ethnicity, or origin

[ ] Prefer not to answer [ ] Write in: _____

What is their gender? (Choose one.)(required):

[ ] Female [ ] Male [ ] Gender non-binary

[ ] Transgender female [ ] Transgender male [ ] Prefer not to answer

[ ] Write in:_____

What is their address, phone number, and email address?

_____ _____
Street City, State, ZIP Code

_____ _____
Phone (xxx-xxx-xxxx) Email address

3. Do you or the respondent need an interpreter or a disability accommodation? (Choose all that apply)

[ ] Yes. I need an interpreter. An interpreter will be provided for free by the court.
What language do you or the respondent speak?
_____

[ ] Yes. I have a disability, or the respondent has a disability.
What accommodation do you or the respondent need?
_____

[ ] No.

2.

4 The respondent committed workplace violence. The respondent knowingly caused or threatened to cause bodily injury or significant property damage to (choose all that apply):

[ ] the business or organization.

[ ] The following employees of the business or organization: (This can include you)

Name (first and last name)

These employees were performing their duties as employees when the workplace violence happened.

[ ] I have made a good faith effort to tell these employees that I am seeking a workplace violence protective order.

Feeling terrorized, frightened, intimidated, or harassed

5. The workplace violence involved (choose all that apply):

[ ] Actual bodily injury or significant property damage. This would cause a reasonable person to feel terrorized, frightened, intimidated, or harassed.

[ ] Threats of bodily injury or significant property damage. These threats would cause a reasonable person to fear that the threats would be carried out. If the threats were carried out, they would cause a reasonable person to feel terrorized, frightened, intimidated, or harassed.

Description of workplace violence

6. The respondent threatened to cause or knowingly caused bodily injury or significant property damage.

Describe the most recent threat or incident of bodily injury or significant property damage:

a. When did it happen? (Date.): _____

b. Where did it happen? (City and state.): _____

c. Describe what happened:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

d. Did the police come? [ ] No [ ] Yes

e. If the police came,

Which police department came? _____

Was anyone arrested? [ ] No [ ] Yes

If yes, who was arrested? _____

What is the police case number? _____

Did anyone get a ticket or citation? [ ] No [ ] Yes

If yes, who got the ticket? _____

What did the police do?

_____

_____

[ ] Check here if you need more space and attach additional pages to this form.

f. Did respondent use or threaten to use a gun? [ ] No [ ] Yes
(If yes, describe the gun the respondent used or threatened to use against you.):

_____

_____

g. Did respondent use or threaten to use some other weapon? [ ] No [ ] Yes
(If yes, describe the weapon the respondent used or threatened to use against you.):

_____

_____

h. Was anyone hurt? [ ] No [ ] Yes
(If yes, describe.)

_____

_____

i. Other facts:

_____

_____

_____

_____

7. Describe the next most recent threat or incident of bodily injury or significant property damage (if any):

a. When did it happen? (Date.): _____

b. Where did it happen? (City and state.): _____

c. Describe what happened:

_____

_____

_____

_____

_____

_____

_____

_____

_____

d. Did the police come? [ ] No [ ] Yes

e. If the police came,

Which police department came? _____

Was anyone arrested? [ ] No [ ] Yes

If yes, who was arrested? _____

What is the police case number? _____

Did anyone get a ticket or citation? [ ] No [ ] Yes

If yes, who got the ticket? _____

What did the police do?

_____

_____

[ ] Check here if you need more space and attach additional pages to this form.

f. Did respondent use or threaten to use a gun? [ ] No [ ] Yes
(If yes, describe the gun the respondent used or threatened to use against you.):

_____

_____

g. Did respondent use or threaten to use some other weapon? [ ] No [ ] Yes
(If yes, describe the weapon the respondent used or threatened to use against you.):

_____

_____

h. Was anyone hurt? [ ] No [ ] Yes
(If yes, describe.)

_____

_____

i. Other facts:

_____

_____

_____

_____

[ ] Check here if there are more incidents you want to describe, and attach additional pages to this form.

Request for Protective Orders

The court should issue the following orders.

(Choose all that apply.)

8. [X] **Personal Conduct**

Order the respondent:

[ ] to not threaten to cause or knowingly cause bodily injury to the employees listed below while that employee is performing their duties as an employee. The respondent represents a credible threat to the safety of these employees.

Name (include first and last name) (required) Nombre (incluya nombre y apellido) (obligatorio)	Date of birth (mm/dd/yyyy)(required) Fecha de nacimiento (mes/día/ año) (obligatorio)	Relationship to the respondent (required) Write “none” if there is no relationship

[ ] to not threaten to cause or knowingly cause significant damage to my property or the property of the business or organization.

8. [ ] **No threats**

Order the respondent to not threaten my business or organization or the employees listed above while these employees are performing their duties as an employee.

9. [ ] **Stay Away Order**

Order the respondent to stay away from the workplace where the respondent caused or threatened to cause the workplace violence located at:

_____
(Street, City, State, ZIP)

Petitioner must read and sign below:

I swear:

- I am the petitioner and I have read this Petition for Workplace Violence Protective Order.
- **I understand it is a serious crime to lie to get a protective order.** If I lie, I can be charged with a felony, punishable by up to 5 years in prison.
- The statements in this request are true and correct to the best of my knowledge.
- I believe I have the right to the protective orders I have asked for in this request.
- I am not using this request to harass respondent or to abuse the judicial process.

Petitioner

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

_____ Signature ► _____
Date

Printed Name _____

Attorney (if applicable)

Date _____ Signature ► _____

Printed Name _____