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## DISORDERLY CONDUCT RESTRAINING ORDERS

1. There is an **\$80.00 filing fee** for the filing of a request for issuance of a Disorderly Conduct Restraining Order, unless the case involves domestic violence.
2. If you file your request, the Judge may decide that the facts alleged are not sufficient for issuance of an Order. The filing fee **will not** be refunded.
3. If you are under the age of 18 years, you must have a parent, attorney, or guardian involved before it will be considered by the Court.

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**Please file these documents with the Morton County Clerk of Courts Office located on 2<sup>nd</sup> floor of the courthouse. (701) 667-3358**

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## INSTRUCTIONS FOR REQUESTING A DISORDERLY CONDUCT RESTRAINING ORDER

### IMPORTANT! READ BEFORE USING THIS PACKET

ND Legal Self Help staff and court employees cannot help you fill out the form(s).

A state's attorney may advise and assist any person in the preparation of documents necessary to secure a restraining order under North Dakota Century Code § 12.1-31.2-01. Be aware that there are limitations on the amount of assistance a state's attorney may provide.

If you are unsure how to proceed, or need legal advice or legal representation, consult a lawyer licensed to practice in North Dakota.

To protect your rights, carefully read this information and any instructions to which you are referred.

You may go to court without a lawyer, but you will have to abide by the state or federal laws that apply to your case, the appropriate court rules, including North Dakota Rules of Civil Procedure, and any local court rules. Links to the rules and state laws can be found at [www.ndcourts.gov](http://www.ndcourts.gov).

A glossary with definitions of legal terms is available at [www.ndcourts.gov/ndlshc](http://www.ndcourts.gov/ndlshc).

*These instructions and forms are not a complete statement of the law. They cover basic procedure for petitioning for a disorderly conduct restraining order. If the forms do not fit your circumstances, consult a lawyer. There is no guarantee that all judges and courts will accept forms available through the ND Legal Self Help Center. Use at your own risk.*

Chapter 12.1-31.2 of the North Dakota Century Code governs disorderly conduct restraining orders in North Dakota.

### Who Should Use this Packet?

Any adult person who is a victim of disorderly conduct or the parent or guardian of a minor who is a victim of disorderly conduct.

### Definitions:

**Disorderly Conduct** - Intrusive or unwanted acts, words, or gestures that are intended to adversely affect the safety, security, or privacy of another person. Disorderly conduct includes

human trafficking or attempted human trafficking as defined in Title 12.1 of the North Dakota Century Code. Disorderly conduct does not include constitutionally protected activity.

**Petitioner** – Person requesting action.

**Protected Party** – Victim of the conduct complained of in the petition.

**Respondent** – Person alleged by Petitioner to be engaged in Disorderly Conduct.

## **STEP 1: PREPARE THE DISORDERLY CONDUCT FORMS**

1. Petition For Disorderly Conduct Restraining Order
2. Protection/Disorderly Conduct Restraining Order Cover Sheet

### **Petition For Disorderly Conduct Restraining Order**

#### **Page 1:**

- Fill in the County at the top right of the page. The Case No. will be assigned by the Clerk of Court in Step 2.
- You are the Petitioner.
  - If there are multiple Protected Parties against one Respondent they can all be included on one petition.
    - **NOTE: There must be a separate petition for each Respondent.**
- The other person is the Respondent.
- Try to use full, complete names, not nicknames.
- Check the first blank if the disorderly conduct is directed at you, the Petitioner.
- Check the second blank if the disorderly conduct is directed at your minor child or a minor ward and complete the minor child's/ward's age.
- Check both if the disorderly conduct is directed at both you and your child/ward.
- Provide your address and the Respondent's address.
- Provide your age and the Respondent's age.
- Check who you are requesting the temporary restraining order for (you, your child, your ward) and if the Respondent should have no contact with any other persons.
- List the actions that support your request for the Temporary Disorderly Conduct Restraining Order. Include as many details or facts as you can to show why you need the Order. (Attach additional sheets if necessary; the page with your signature should be the last page of the document.)

**Page 2:**

- List any persons who may have witnessed the events you list in your Petition.
- **Do Not sign** the petition until you are in front of the Notary Public or Clerk of Court. The Notary or Clerk will witness your signature. You will need to show a driver's license or photo identification so the Notary or Clerk can verify your identity. If you are unsure of what type of identification to bring, contact the Notary Public or Clerk of Court.

**Protection/Disorderly Conduct Restraining Order Cover Sheet**

- Complete the Protection/Disorderly Conduct Restraining Order Cover Sheet. All areas marked with an \* must be completed. Try to fill out as much information as you can on this form. Attach additional sheets if needed, do not use the back side for additional information. This form is designed to help law enforcement enforce the judge's order.

**STEP 2: FILE THE FOLLOWING WITH THE CLERK OF COURT:**

1. Petition For Disorderly Conduct Restraining Order
2. Protection/Disorderly Conduct Restraining Order Cover Sheet

You may be asked to pay a filing fee. Verify with the Clerk of Court if you are required to pay the filing fee. If you feel you cannot afford the filing fee, complete the Fee Waiver Forms available on the ND Legal Self Help Center website at [www.ndcourts.gov/ndlshc](http://www.ndcourts.gov/ndlshc) by clicking on the "Other Forms" link.

After your Petition is filed with the Clerk of Court, the Clerk of Court will forward it to the Judge for review. If the Judge finds reasonable grounds to believe the Respondent has engaged in disorderly conduct, the Judge will sign a Temporary Disorderly Conduct Restraining Order.

The Temporary Disorderly Conduct Restraining Order is generated by the Clerk of Court and served on the Respondent by local law enforcement. A copy will be mailed to you at the address you provide to the Court in the Petition form. Once the Respondent is served with the Temporary Disorderly Conduct Restraining Order, the Order is in effect and any violations should be reported to police.

**STEP 3: ATTEND THE HEARING**

A hearing date will be scheduled within 14 days of the approval of the Temporary Disorderly Conduct Restraining Order unless extended or upon showing that despite the exercise of due diligence the Respondent could not be served with the Temporary Disorderly Conduct Restraining Order.

The hearing date will be listed in the Temporary Disorderly Conduct Restraining Order. **You must appear at the hearing.** If you have any witnesses to the facts you included in your Petition, you may bring them with you to the hearing.

The hearing also gives the Respondent the opportunity to give the Respondent's side of the story and present any witnesses to the facts alleged in the Petition.

At the hearing, the Judge will determine whether the Temporary Order should be extended and whether a Disorderly Conduct Restraining Order should be issued for a set period of time. The set period of time cannot be for more than two (2) years.

### **IF THE PETITION IS GRANTED**

If the Court determines that there are reasonable grounds that the Respondent committed disorderly conduct, the Judge will sign the Disorderly Conduct Restraining Order and specify the length of the Order. The Clerk of Court will send a copy of the Disorderly Conduct Restraining Order to the local law enforcement agency with jurisdiction over the residence of the victim. Report any violations of the Order to local law enforcement.

# DOMESTIC VIOLENCE PROTECTION/DISORDERLY CONDUCT RESTRAINING ORDER/ SEXUAL ASSUAL RESTRAINING ORDER COVER SHEET

*To be delivered to the responsible Law Enforcement Agency along with the Order.*

**Type or print clearly! All areas with an asterisk (\*) must be completed.** This information is necessary to serve, enforce and enter your order into the statewide law enforcement system. Fill in the following information as completely as possible.

Court:	Case Number:
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### Restrained Person's Information (This is the person that you want the court to restrain.)

Is Respondent to be removed from the residence?  No  Yes

Are weapons involved?  No  Yes If Yes, how many: \_\_Pistols \_\_Rifles \_\_Shotguns \_\_Other \_\_\_\_\_

Does Respondent possess a ND Concealed Weapons Permit?  No  Yes  Unknown

Is Respondent known to be violent towards persons other than the Protected Person(s)?  No  Yes Please explain:

<b>Name*:</b>	First	Middle	Last	Nickname	Relationship to Protected Person
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Gender* <input type="checkbox"/> Male <input type="checkbox"/> Female	Race* <input type="checkbox"/> Asian <input type="checkbox"/> Indian <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Unknown
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Height	Weight	Eye Color	Hair Color	Other Identifying Characteristics
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<b>Last Known Address*</b> Street: City: State: Zip:	Phone(s) w/Area Code
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Other Address(es) Where Respondent May be Found:

Employer	Employer's Address	WORK Hours: Phone:
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Vehicle Make and Model	Vehicle Color	Vehicle Year
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**AT LEAST ONE of the Following is Required\*:**

Date of Birth	Social Security Number	Vehicle License Number & State (expiration date is required)	Drivers License or ID number & State (expiration date is required)
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### Protected Person's Information (This is the person you want the court to protect.)

<b>Name*:</b>	First	Middle	Last
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Date of Birth or Social Security Number*	<input type="checkbox"/> Male <input type="checkbox"/> Female	Race	Height	Weight	Eye Color	Hair Color
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Current Address Street: City: State: Zip:	Phone(s) w/Area Code
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If you filed for someone else, list your name, phone number and address:	Notification of Service? <input type="checkbox"/> No <input type="checkbox"/> Yes Phone(s):
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### Other Protected Persons Information (These are the other persons listed in the petition you want the court to protect.)

Name*:	First	Middle	Last	Gender	Birth date or Social Security Number *	Resides With	Relationship to Protected Person
				<input type="checkbox"/> Male <input type="checkbox"/> Female			
				<input type="checkbox"/> Male <input type="checkbox"/> Female			
				<input type="checkbox"/> Male <input type="checkbox"/> Female			
				<input type="checkbox"/> Male <input type="checkbox"/> Female			

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF \_\_\_\_\_

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

\_\_\_\_\_  
Petitioner,  
vs.  
\_\_\_\_\_  
Respondent.

**PETITION FOR  
DISORDERLY CONDUCT  
RESTRAINING ORDER**

The undersigned Petitioner states as follows:

I am the victim of the conduct complained of in this petition.

I am the [parent] [guardian] of \_\_\_\_\_, who is the victim of the conduct complained of in this petition.  My [child's] [ward's] age is: \_\_\_\_\_

My address is: (Petitioner may ask the court to leave this line blank) \_\_\_\_\_

The respondent's address is: \_\_\_\_\_

My age is: \_\_\_\_\_ The respondent's age is: \_\_\_\_\_

My relationship to respondent is: Underline the appropriate word (stranger, spouse, ex-spouse, friend, other relative, acquaintance, other.)

I ask that a temporary restraining order be given requiring the respondent to stop the disorderly conduct directed at  me  my child  my ward. I also ask that the respondent have no contact with \_\_\_\_\_. I request that a hearing be scheduled and that a more permanent restraining order be given after that hearing.

Beginning with the most recent event, these are the actions that support my request for a restraining order (include dates). This is what happened: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

[Use additional sheet if necessary]

People who witnessed these events are: Name(s): \_\_\_\_\_

\_\_\_\_\_  
[If there are other events which support your petition, describe them on an additional sheet of paper. Include the date of the event and the name of any witness(es).]

Dated this \_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_.

\_\_\_\_\_  
(Signature of Petitioner)

Subscribed and sworn before this \_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_.

\_\_\_\_\_ County, North Dakota

\_\_\_\_\_  
Clerk or Notary Public

If notary, my commission expires: \_\_\_\_\_