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| --- | --- |
| **Request and Affidavit to**  **Change**  **Restrict Parenting Time**  *(Motion to Modify/Restrict Parenting Time & Affidavit)* | JDF 1406  **COURT USE ONLY** |
| District Court  Colorado County: **WELD**  Court Address: **PO BOX 2038, GREELEY, CO 80632**  **Parties**  Petitioner *(Parent or person who started the legal case):*    Co-Petitioner/Respondent *(Other person in this case):* |
| Lawyer (if any)  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Lawyer Reg. #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Case  Number:  Division:  Courtroom: |

To the parent/party receiving this request:

For a *Request to* ***Change*** *Parenting Time*, you have 21 days to file a written response. §14-10-129, C.R.S.

*Note: Check your current Order to see if you are required to mediate prior to filing this request.*

For a *Request to* ***Restrict*** *Parenting Time***,** your written response can be filed on or before the emergency hearing. A hearing will be held within 14 days from the filing of this request, if granted by the court. §14-10-129(4), C.R.S

1. Petitioner’s Information  Check if in Military

Full Legal Name: Date of Birth:

Current Mailing Address: Apt. #:

City: State: Zip:

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check here if you consent to receive court filings (service) by email. *C.R.C.P. 5(b)(2)(D).*

Do you need an interpreter?  No  Yes, in (language):

1. Co-Petitioner/Respondent’s Information  Check if in Military

Full Legal Name: Date of Birth:

Current Mailing Address: Apt. #:

City: State: Zip:

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check here if you consent to receive court filings (service) by email. *C.R.C.P. 5(b)(2)(D).*

Do you/they need an interpreter?  No  Yes, in (language):

1. Information About Child(ren) - I am making this request for our child(ren) listed below:

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name of Child | Current Address | Sex | Date of Birth |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Date of current Parenting Time Order** *(date):*  .
2. **Prior changes to Parenting Time Order**

Has a request to change parenting time been filed in the last 2 years?  Yes  No

If *Yes,* list the date of that request:

1. **Restrict Parenting Time**
2. Are you filing a Request to Restrict Parenting time?

No (skip to #7)  Yes (check the boxes that apply):

I ask the court to **restrict** the other party’s parenting time because I believe the children are in imminent/immediate danger because of the parenting time contact. (§14-10-129(4), C.R.S.)

I request an emergency hearing within 14 days and for supervised parenting time until then. Supervision will be provided by a licensed mental health professional or someone the court appoints.

b**.** Explain in detail why you believe the child(ren) are in imminent/immediate danger. (Give examples and include dates as needed):

c. I request that the parenting time be restricted as follows:

1. **Change Parenting Time**

I believe the parenting time changes are in the best interest of the child(ren).

1. Describe the current parenting time order you have with the other parent (or party):

1. Describe the parenting time schedule you are requesting and why:

1. **Previous** **Convictions**

Check here if the other parent (or party) was convicted of a sex or violent crime that could put the child(ren) in danger (§14-10-129(3)(a), C.R.S.)

Case number: State: County: Date:

Please explain:

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

1. **Notification of Changes**

Have you talked to the other person about this request to change parenting time?  Yes  No

If Yes, please explain:

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

1. Active Protection or Restraining Orders

Has anyone listed above been named in a protection/restraining order?  Yes  No

If Yes:

The Order was:  Temporary  Permanent

MRO (Criminal Restraining Order)

Made by the following court:  Municipal  County  District/Juvenile

Court location (County & State):

Case number:

Date of Order:

Name of protected person(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of restrained person(s):

What did the Order say?  Stay-away  No contact

Other *(explain):*

1. **Changes to Child Support**

Do you also need to change child support?  Yes  No

If yes, also include JDF 1403 - Motion to Modify Child Support*.*

### Verification

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_, at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(date) (month) (year) (city or other location, and state OR country)

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

(Printed name of Petitioner) Signature of Petitioner)

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

Address City State Zip Code

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

(Area Code) Telephone Number (home) (Area Code) Telephone Number (work)

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

Lawyer Signature, if any

### Verification

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_, at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(date) (month) (year) (city or other location, and state OR country

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

(Printed name of Co-Petitioner/Respondent) Signature of Co-Petitioner/Respondent)

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

Address City State Zip Code

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

(Area Code) Telephone Number (home) (Area Code) Telephone Number (work)

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

Lawyer Signature, if any

###### Certificate of Service

I certify that on *(date):* a copy of this documentwas served on the other parties by:

Hand Delivery  Colorado Courts Efiling

Fax or email to (number/address):

By U.S. mail, addressed to:

To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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Your signature **(REQUIRED)**

Check here if you also sent a copy to the Child Support Enforcement Unit. You must send them a copy if they are involved in the case.