

<input type="checkbox"/> Municipal Court <input type="checkbox"/> County Court <input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile <input type="checkbox"/> Denver Probate _____ County, Colorado Court Address: _____ _____ Petitioner(s): _____ v. _____ Respondent: _____		<b>▲ COURT USE ONLY ▲</b>
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____		
<b>MOTION TO <input type="checkbox"/>MODIFY <input type="checkbox"/>DISMISS</b> <b><input type="checkbox"/>TEMPORARY <input type="checkbox"/>PERMANENT PROTECTION ORDER</b>		

As the Protected Person Protected Person's Attorney, Parent, Legal Guardian or Appointed Conservator Restrained Person, I \_\_\_\_\_ am requesting that the current Protection Order be modified/dismissed for the following reasons:

---



---



---



---



---



---

**The following must be complied with by the RESTRAINED PERSON for any action to be taken by the Court:**

- The Permanent Protection Order was issued on or after July 1, 2013. As the Restrained Person, I verify that at least two years have passed since the permanent order was issued or the last modification has been ordered. (§13-14-108(2)(b), C.R.S.)
- The Permanent Protection Order was issued prior to July 1, 2013. As the Restrained Person, I verify that at least four years have passed since the permanent order was issued or the last modification has been ordered. (§13-14-102(17.5)(a), C.R.S., as it existed prior to July 1, 2013)
- As the Restrained Person, I verify that a complete and current fingerprint-based criminal history record check has been conducted within 90 days prior to the filing of this motion and I have attached the results to this Motion. (§13-14-108(3)(b), C.R.S.)
- As the Protected Person, I am not aware of any new misdemeanor or felony convictions (including a plea of guilty) of the Restrained Person against me since the issuance of the protection order. (§13-14-108(3)(a)(I), C.R.S.)
- As the Restrained Person, I verify that certified copies of all criminal dispositions not reflected in the attached fingerprint-based criminal history record check have been attached to this Motion.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

---

---

### SIGNATURE

\_\_\_\_\_  
(Printed name of  Petitioner  Respondent)

\_\_\_\_\_  
Signature of  Petitioner  Respondent

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City,

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone (Home)

\_\_\_\_\_  
(Work )

\_\_\_\_\_  
(Cell)

\_\_\_\_\_  
(E-mail)

#### Notice to Appear in Court

You are scheduled to appear for a hearing on this Motion to  Modify  Dismiss the existing  Temporary  Permanent Protection Order on \_\_\_\_\_ (date) \_\_\_\_\_ (time) at the Court address stated in the above caption in courtroom \_\_\_\_\_.

Date: \_\_\_\_\_

\_\_\_\_\_  
Clerk of Court/Deputy Clerk

<input type="checkbox"/> Municipal Court <input type="checkbox"/> County Court <input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile <input type="checkbox"/> Denver Probate _____ County, Colorado Court Address: _____ _____ Petitioner: _____ <b>v.</b> Respondent: _____ Address: _____ _____	▲ <b>COURT USE ONLY</b> ▲ Case Number: _____ 16 Character #: _____ Division _____ Courtroom _____
<b>MOTION TO <input type="checkbox"/> MODIFY <input type="checkbox"/> DISMISS  <input type="checkbox"/> TEMPORARY <input type="checkbox"/> PERMANENT PROTECTION ORDER          RETURN OF SERVICE</b>	

I declare under oath that I am 18 years of age or older and not a party to the action and that I served the Motion to Modify/Dismiss Temporary/Permanent Protection Order on the  Petitioner  Respondent in \_\_\_\_\_ (County) \_\_\_\_\_ (State) on \_\_\_\_\_ (date) \_\_\_\_\_ (time) at the following location: \_\_\_\_\_

- By handing it to a person identified to me as the  Petitioner  Respondent.
- By leaving it with the  Petitioner  Respondent who refused service.
- By leaving it with \_\_\_\_\_ (Type or write name legibly) who is designated to receive service for the  Petitioner  Respondent because of the following relationship: \_\_\_\_\_ as provided for in C.R.C.P. 4(e).
- I attempted to serve the  Petitioner  Respondent on \_\_\_\_\_ occasions but have not been able to locate the  Petitioner  Respondent. Return to the  Petitioner  Respondent is made on \_\_\_\_\_ (date).
- By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.
- By checking this box, I am acknowledging that I have made a change to the original content of this form.

Private process server  
 Sheriff, \_\_\_\_\_ County  
 Fee \$ \_\_\_\_\_ Mileage \$ \_\_\_\_\_  
 Fee waived, Domestic Violence Protection Order.

\_\_\_\_\_  
Signature of Process Server  
\_\_\_\_\_  
Name (Print or type)

Subscribed and affirmed, or sworn to before me in the County of \_\_\_\_\_, State of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

My Commission Expires: \_\_\_\_\_  
 \_\_\_\_\_  
 Notary Public