**4-968. Application to modify, terminate, or extend the order of protection from domestic abuse.**

[Standard simplified domestic abuse form,

Family Violence Protection Act,

Sections 40-13-1 to 40-13-8 NMSA 1978]

STATE OF NEW MEXICO

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ JUDICIAL DISTRICT COURT

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Petitioner

v. No. \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Respondent

**APPLICATION TO MODIFY, TERMINATE, OR EXTEND**

**THE ORDER OF PROTECTION FROM DOMESTIC ABUSE**

[ ] Petitioner [ ] Respondent asks the court:

*(check and complete applicable alternatives)*

[ ] to modify the protection order as follows: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

[ ] to terminate the protection order because: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

[ ] to extend the protection order for an additional\_\_\_\_\_\_\_\_\_\_\_\_(days) (months) because: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

The other party:

[ ] objects to the extension, modification, or termination of the protection order.

[ ] agrees to the extension, modification, or termination of the protection order.

[ ] has not told me whether (he) (she) objects or agrees to the extension, modification, or termination of the protection order.

**VERIFICATION**

I, the [ ] Petitioner [ ] Respondent, affirm under oath and penalty of perjury under the laws of the State of New Mexico that I am the [ ] Petitioner [ ] Respondent in the above-entitled cause; that I have read this application to modify, terminate, or extend the order of protection from domestic abuse; and that the contents of the application are true and correct to the best of my information and belief.

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

Date Signature of party filing this application

STATE OF NEW MEXICO )

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_ ) ss

TRIBE OR PUEBLO \_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

Signed and sworn before me on this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

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

Notary public

My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**CERTIFICATE OF SERVICE**

I hereby certify that on this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_ this application was

[mailed by United States mail, postage prepaid, and addressed to:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State and zip code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

[faxed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(name of person who faxed document)* to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(name of recipient)* at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(telephone number)*.

The transmission was reported as complete and without error. The time and date of the transmission was \_\_\_\_\_\_\_\_ (a.m.) (p.m.) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(date)*.]

[e-mailed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(name of person who transmitted)* to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(name of recipient)* at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(electronic mail address of recipient)* who agreed to service in this manner. The transmission was successful. The time and date of the transmission was \_\_\_\_\_\_\_\_\_ (a.m.) (p.m.) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(date)*.]

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

Signature of attorney

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

Date of signature

*If this notice was served by a person other than an attorney, the following must also be completed and filed with the court:*

**AFFIDAVIT OF SERVICE**

I affirm under penalty of perjury under the laws of the State of New Mexico that a copy of this application was served by [mail] [fax] [electronic transmission] as described above on this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_.

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

Signature of person who made service

[Approved, effective November 1, 1999 until July 1, 2001; approved, effective May 1, 2001; as amended by Supreme Court Order No. 08-8300-40, effective December 15, 2008; by Supreme Court Order No. 12-8300-026, effective for all cases filed or pending on or after January 7, 2013; as amended by Supreme Court Order No. 14-8300-023, effective for all pleadings and papers filed on or after December 31, 2014; as amended by Supreme Court Order No. 15-8300-024, effective for all pleadings and papers filed after November 18, 2015.]