See Instructions (ERP101) for help in filling out this form.

Sta	State of Minnesota	District Court
Со	County of: Court File N	lumber:
Ju	Judicial District: Case Type:	Extreme Risk Protection Order
Pe	Petitioner	
VS	VS	
Ro	Respondent	
ne.	Respondent	
	Petition for Extreme Risk Protection O Minn. Stat. §§ 624.7172 and 624.717	· · · · ·
1.	1. Petitioner Information – Law Enforcement Agency or City/	County Attorney:
	Petitioner is:	
	Chief Law Enforcement Officer (or designee)	
	City or County Attorney	
	Petitioning Agency Name:	
	Agency Street Address:	
	City, State, Zip Code:	
	Affiant/Signer Name (first last):	
	(If petitioning as a law enforcement agency or city/county	[,] attorney skip to question #5.)
2.	2. Petitioner Information – Family/Household Member or Gu	ardian:
	First Name:	
	Middle Name:	
	Last Name:	
	Date of Birth:	

3.	Petitioner Address - Family/Household Member or Guardian:
	I am requesting that my address be kept confidential by submitting the completed Confidential Address Request form (ERP104) to the court.
	OR
	\Box I am not requesting that my address be kept confidential. My address is:
	Street Address:
	City, State, Zip Code:
4.	Petitioner Relationship to Respondent – Family/Household Member or Guardian:
	I am petitioning as: (check one and fill in required information)
	 Family or Household Member (please check all that apply to indicate your family/household relationship to the Respondent)
	□ Spouse
	Former Spouse
	\Box Parent/Child (Respondent is your: \Box Parent \Box Child)
	Currently living together. For how long?
	Significant romantic or sexual relationship. (If this is the only box you checked for family/household relationship, please provide additional information below.)
	Length of Relationship:
	Type of Relationship:
	How often do you have contact with Respondent?
	□ Guardian of Respondent, as defined by Minn. Stat. § 524.1-201.
	Date of court order establishing guardianship:
	Guardianship Court File Number:
	Important: List the primary law enforcement agency serving the jurisdiction (location) where the respondent lives, if you know:

5. Respondent Information:

First Name:
Middle Name:
Last Name:
Street Address:
City, State, Zip Code
Telephone:
Race: Gender 🗆 Male 🗆 Female
Date of birth: If unknown, age or approximate age
(Respondent's race, gender, and date of birth or approximate age are required for reporting requirements.)
Is Respondent under the age of 18? \square Yes \square No
If yes answer these questions only if Respondent is younger than 18:
Respondent's parent's or guardian's name:
Parent or guardian address:

6. **Request for Order:** Respondent poses a significant danger of bodily harm to others and/or is at significant risk of suicide. (Check all that apply)

□ I request a temporary emergency order. Respondent presents an **immediate and present** danger of bodily harm to others or taking their own life. I understand that this order will generally last for no more than 14 days and does not require a hearing. I can request a hearing in question #7 below. (Minn. Stat. § 624.7174)

AND/OR

□ I request a long-term order that will last between six months and one year. I understand that a hearing must be held before this order can be issued and that a hearing will generally be held within 14 days. (Minn. Stat. § 624.7172)

7. **Request for Hearing:** If requesting a temporary emergency order **only** and the request is denied, do you want a hearing? □ Yes □ No

8. Reasons for Petition:

Describe the reasons the Respondent poses a significant danger of bodily harm to others or is at significant risk of suicide if they possess or purchase a firearm. Things to consider while filling in the details:

- Check all boxes that apply and explain with as much detail as possible. If the exact date is unknown, give a date range.
- → If you need more space for your explanation, add another piece of paper labeled with the paragraph number/heading included. For example, "Attachment for Reasons for Petition 8 a." Do not write on the back of the page or in the margins.
- → You may have supporting documents, like medical records or police reports, that will be helpful in explaining your concern and answering the questions below. Please read the *Instructions* (ERP101) for more information on how to file these supporting documents. Even with the supporting documents, you must still explain the reasons for your petition below.
- □ a. Respondent has a history of threats or acts of violence directed toward another person.

	Respondent has a history of use, attempted use, or threatened use of physical for against another person.
	Date (date range):
	Explain in detail:
_ 0.	Respondent has previously violated a court order (including, but not limited to ord issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B):
_ 0.	
_ 0	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B):
_ •	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range):
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range):
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range):
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range):
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range):
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range): Explain in detail:
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range):
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range): Explain in detail: Respondent has a prior arrest for a violent felony offense: Date (date range):
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range): Explain in detail:
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range): Explain in detail: Respondent has a prior arrest for a violent felony offense: Date (date range):
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range): Explain in detail: Respondent has a prior arrest for a violent felony offense: Date (date range):
	issued under Minn. Stat. §§ 624.7171-624.7178, Chapter 260C, or Chapter 518B): Date (date range): Explain in detail: Respondent has a prior arrest for a violent felony offense: Date (date range):

\Box e. Respondent has a conviction or prior arrest for a violent misdemeanor offense, for a
stalking offense under Minn. Stat. § 609.749, or for domestic assault under Minn.
Stat. § 609.2242:

Date (date range):
Explain in detail:
□ f. Respondent has a conviction for an offense of cruelty to animals under Chapter 343:
Date (date range):
Explain in detail:
□ g. Respondent unlawfully or recklessly used, displayed, or brandished a firearm.
Date (date range):
Explain in detail:

 \Box h. Respondent has a history of suicide attempts or a serious mental illness.

	atail
	etail:
§§ 624.7171-	has been named in an existing order in effect under Minn. Stat. 624.7178, or Chapter 260C, or Chapter 518B, or is a party to a pending plaint, petition, or other action under Minn. Stat. §§ 624.7171-624.717 18B.
Date (date r	ange):
Dute funce	
	etail:

 \Box j. other:

Date (date range):		
Explain in detail:		

9. Emergency Request

If requesting an emergency order in question 6 explain in detail why you think Respondent presents an immediate and present danger of bodily harm to others or taking their own life.

10. Court Appearance: If a hearing is scheduled, you must appear at the hearing. You may state your preference, but you must appear in the manner ordered by the court.

 \Box I request to appear virtually (remotely).

- \Box I request to appear in person.
- □ I don't have a preference between virtual (remote) or in-person appearance.

\rightarrow Plea	ase note: If the court denies your request to appear virtually, you may refile the
petition	in the county where you live or work to appear in person. Minn. Stat.
§ 624.71	.71, subd. 2 (b).

11. **Firearms Information:** To the best of my knowledge, the Respondent possesses _____ (number) firearms. The description and location of any firearms is listed on the *Firearm Information Form* (ERP103) submitted with this Petition.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated:	
	Signature
	Name
County and state where signed	(If you have asked to keep your address confidential, do not include it here.)
	Address:
	City/State/Zip:
	Phone:
	Email:

Notice: If your address or telephone changes, you must give Court Administration your new information right away, in writing.

Attorney Representing Petitioner (if any)

Signature
Name:
Attorney/Bar Number:
Address:
City/State/Zip:
Phone:
Email: