State of Minnesota **District Court**

County of:_____ Court File Number:_____

Judicial District:_____ Case Type: Extreme Risk Protection Order

_____
Petitioner

vs

_____
Respondent

Application to Terminate Extreme Risk Protection Order (ERP402)

Minn. Stat. § 624.7173(b)

1. I am the Respondent in this case.
2. An Extreme Risk Protection Order was issued against me in this case on _____ (date) under Minn. Stat. § 624.7172.
3. I ask that the court terminate (end) the Extreme Risk Protection Order against me.
4. I do not pose a significant danger to other persons and I am not at significant risk of suicide by possessing a firearm, because: (Explain in detail. Attach more pages if necessary.)

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5. I understand that a hearing will be held on this request, and I will need to prove by clear and convincing evidence that I do not pose a significant danger to other persons and I am not at significant risk of suicide by possessing a firearm.

6. I understand that I can only apply to terminate (end) the Extreme Risk Protection Order once every 6 months that the order is in effect.

Dated: _____

_____
Signature

Name _____
Address: _____
City/State/Zip: _____
Phone: _____
Email: _____