

# MAINE JUDICIAL BRANCH

## HELP FOR PEOPLE FILING A PROTECTION ORDER

If you are a victim of violence, abuse, or harassment and believe you are in immediate danger, call 9-1-1.  
For help locating emergency services in your area, call 2-1-1.

### SEXUAL ASSAULT/HARASSMENT HELP

**Sexual Assault & Harassment Statewide 27/7 Hotline**  
1-800-871-7741  
[mecasa.org](http://mecasa.org)

### DOMESTIC VIOLENCE HELP

**Domestic Violence Statewide 27/7 Hotline**  
1-800-834-HELP  
[mcedv.org](http://mcedv.org)

### More Sexual Assault and Domestic Violence Help

#### Tribal Sexual Assault & Domestic Violence 27/7 Hotline Numbers

*Wabanaki Women's Coalition*

Micmac Advocacy Center • (207) 551-3639 Maliseet Advocacy Center • (207) 532-6401

Indian Township Passamaquoddy Advocacy Center • (207) 214-1917

Passamaquoddy Peaceful Relations Advocacy Center • 1-877-853-2613

Penobscot Nation Advocacy Center • (207) 631-4886

### How can an advocate help me?

**An advocate is a trained person who can help a victim of violence, abuse, or harassment to:**

- Give you information about protection orders and help you understand what happens in court;
- Help you file court paperwork and find legal help;
- Go with you to your hearing and give you support and information;
- Help you with other services like housing, counseling, support groups, and mental health help;
- Help make sure you are safe; and
- Provide information on how to file for a protection order if you are under 18.

### LEGAL HELP

#### Maine State Bar Association Lawyer Referral Service

1-800-860-1460 or [www.mainebar.org/page/AttorneyRequest](http://www.mainebar.org/page/AttorneyRequest)  
(30-minute consultation with a lawyer for \$25 administrative fee)

#### Legal Services for the Elderly

1-800-750-5353 or [www.mainelse.org](http://www.mainelse.org)

### MORE INFORMATION

To learn more about the court process to get a protection order, please review [A Guide to Protection from Abuse and Harassment Cases](#) or scan the QR code on the right.



To learn more about how to file for a protection order **by email**, please visit the [Maine Judicial Branch website](#) or scan the QR code on the right.



MAINE JUDICIAL BRANCH

Plaintiff

DISTRICT COURT

Location (Town): \_\_\_\_\_

Docket No.: \_\_\_\_\_

☐ individually **and** on behalf of:

☐ on behalf of:

V.

Defendant

☐ on behalf of:

**PLAINTIFF'S MOTION TO EXTEND ORDER FOR PROTECTION**

☐ **With request for modification of extended order**

19-A M.R.S. § 4111, 5 M.R.S. § 4655(2)

**PLEASE NOTE: You must file form PA-027 if you are filing this electronically. Failure to do so will result in rejection of the Motion.**

1. I obtained an Order for Protection against the defendant from this court. That Order will expire on (mm/dd/yyyy) \_\_\_\_\_.
2. I believe that an extension of the Order for Protection is necessary to protect me and/or my minor child(ren) for the following reasons:

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**THEREFORE, I ask the court to:**

(a) Extend my Order for Protection against the defendant for (*length of extension requested*):

\_\_\_\_\_.

**ADA Notice:** The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, [accessibility@courts.maine.gov](mailto:accessibility@courts.maine.gov), or a court clerk.

**Language Services:** For language assistance and interpreters, contact a court clerk or [interpreters@courts.maine.gov](mailto:interpreters@courts.maine.gov).

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(b) ☐ I also request that my extended Order for Protection be changed or modified as follows:

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(c) If a hearing on this motion cannot be held before the Order for Protection expires, I ask the court to continue the Order in effect until the hearing on this motion to extend.

☐ I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000.00 if I give false information to the court.

Date (mm/dd/yyyy): \_\_\_\_\_



\_\_\_\_\_  
Signature of Plaintiff

**PLEASE NOTE: If you are not filing this motion electronically, you must have a clerk or notary sign below. If you are filing this complaint electronically, you may file it without notarization as long as you checked off the above certification and signed this document.**

STATE OF MAINE

COUNTY \_\_\_\_\_

Personally appeared the above named, \_\_\_\_\_, and made oath that the foregoing statements are true under penalty of perjury.

Date (mm/dd/yyyy): \_\_\_\_\_



☐ Clerk ☐ Notary Public ☐ Attorney

NOTICE OF HEARING

The parties are notified that the hearing in this matter is set for (mm/dd/yyyy) \_\_\_\_\_ at \_\_\_\_\_ ☐ am ☐ pm at the court located at: \_\_\_\_\_.

**IMPORTANT WARNING:** If you fail to appear at court at the above stated time, or at any time the court notifies you to do so, the court may extend the Order for Protection in your absence. The court may grant any or all the relief requested by the plaintiff. A violation of a protection order may constitute a Class D crime or contempt of court. If you intend to oppose this motion to extend, do not fail to appear at the required time. You may obtain a booklet of information about protection from abuse/harassment cases from the court or on the court's website.

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EX PARTE ORDER EXTENDING ORDER FOR PROTECTION

☐ The hearing on the motion to extend is scheduled **after the expiration** of the underlying order for protection. The court hereby extends the order for protection until the hearing on the motion to extend.

☐ The hearing on the motion to extend is scheduled **before the expiration** of the underlying order for protection. If the court reschedules the hearing to a date after the expiration of the order for protection, the order will automatically be extended until the hearing on the motion to extend.

Copies of this Order shall be furnished by the clerk to the law enforcement agency with jurisdiction in the location of the plaintiff's residence.

It is ORDERED that a copy of this Order be served on the defendant by: \_\_\_\_\_.  
(law enforcement agency)

Date (mm/dd/yyyy): \_\_\_\_\_      ► \_\_\_\_\_  
Judge, District Court

RETURN OF SERVICE

On (mm/dd/yyyy) \_\_\_\_\_ at \_\_\_\_\_ ☐ AM ☐ PM, I made service of the Motion to Extend Order for Protection/Order of Extension by delivering a copy in hand to the defendant at:

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

Defendant's date of birth (mm/dd/yyyy): \_\_\_\_\_

Date (mm/dd/yyyy): \_\_\_\_\_      ► \_\_\_\_\_  
Authorized Officer signature

\_\_\_\_\_  
Authorized Officer printed name

\_\_\_\_\_  
Law Enforcement Agency

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PROTECTION ORDER SERVICE INFORMATION

DEFENDANT

Defendant's Name: \_\_\_\_\_

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

Apartment number and/or floor: \_\_\_\_\_

Color of house or other description: \_\_\_\_\_

If living with another person, other person's name: \_\_\_\_\_

Telephone: home/work/cell: \_\_\_\_\_

Hours defendant will most likely be at home: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

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

Work Schedule: ☐ Mon ☐ Tues ☐ Wed ☐ Thurs ☐ Fri ☐ Sat ☐ Sun

Hours Worked: \_\_\_\_\_ ☐ AM ☐ PM to \_\_\_\_\_ ☐ AM ☐ PM

PHYSICAL DESCRIPTION (If known)

Birth Date (mm/dd/yyyy): \_\_\_\_\_

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Hair Color: \_\_\_\_\_

Eye Color: \_\_\_\_\_

Gender: \_\_\_\_\_

Race: ☐ White ☐ Black ☐ Asian or Pacific Islander ☐ American Indian/Alaskan Native ☐ Other

VEHICLE (If known)

Make and Year (yyyy): \_\_\_\_\_

Type/Model: \_\_\_\_\_

Color: \_\_\_\_\_

Registration No. and State: \_\_\_\_\_

If you are unable to provide the above information, please list below the name, address, and telephone number of anyone who can help the serving officer locate the defendant:

ADDITIONAL INFORMATION

Does the defendant own a firearm or other weapon? ☐ No ☐ Yes

If the defendant owns a firearm or other weapon, answer the following questions:

Describe the weapon(s): \_\_\_\_\_

Where is/are the weapon(s) usually kept? Include the address where the weapon(s) are usually kept and describe the location of the weapon(s) (i.e., under the bed), if known: \_\_\_\_\_

Does the defendant have a history of violence? \_\_\_\_\_

Is there anything else the serving officer should know about the defendant? \_\_\_\_\_

PLAINTIFF

Plaintiff's Name: \_\_\_\_\_

Address (unless confidential): \_\_\_\_\_

Telephone: home/work/cell (unless confidential): \_\_\_\_\_

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## MAINE JUDICIAL BRANCH

Plaintiff

DISTRICT COURT

Location (Town): \_\_\_\_\_

Docket No.: \_\_\_\_\_

☐ individually **and** on behalf of:

☐ on behalf of:

V.

Defendant

☐ on behalf of:

### AFFIDAVIT OF CONFIDENTIAL ADDRESS

19-A M.R.S. § 4112(1), 5 M.R.S. § 4656

**PLEASE NOTE:** When your contact information is confidential, the court cannot give your information to an advocate from a domestic violence or sexual assault community agency to call you. An advocate can help you find legal help, explain what happens in court, and go with you to court. If you want help from an advocate, call one of the numbers on the second page of this form.

I am the ☐ plaintiff ☐ defendant in this case and I request that the court keep the following information confidential:

☐ Physical address: \_\_\_\_\_

☐ Mailing address: \_\_\_\_\_

☐ Email address: \_\_\_\_\_

Telephone number:

☐ Cell \_\_\_\_\_

☐ Home \_\_\_\_\_

☐ Work \_\_\_\_\_

☐ Other ( \_\_\_\_\_ ): \_\_\_\_\_

I state under oath that the health, safety, or liberty of myself and/or my child(ren) would be jeopardized by disclosure of this information for the following reasons:

☐ I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court.

Date (mm/dd/yyyy): \_\_\_\_\_

Signature of ☐ plaintiff ☐ defendant

### STATE OF MAINE

COUNTY \_\_\_\_\_

Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.

Date (mm/dd/yyyy): \_\_\_\_\_

☐ Attorney at Law ☐ Notary Public ☐ Clerk

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Sexual Assault/Harassment Help	Domestic Violence Help
<b>Sexual Assault &amp; Harassment Statewide 24/7 Hotline</b> 1-800-871-7741 <a href="http://mecasa.org">mecasa.org</a>	<b>Domestic Violence Statewide 24/7 Hotline</b> 1-866-834-HELP <a href="http://mcedv.org">mcedv.org</a>
More Sexual Assault and Domestic Violence Help	
<b>Tribal Sexual Assault &amp; Domestic Violence 24/7 Hotline Numbers</b> <i>Wabanaki Women's Coalition</i> Micmac Advocacy Center • (207) 551-3639 Maliseet Advocacy Center • (207) 532-6401 Indian Township Passamaquoddy Advocacy Center • (207) 214-1917 Passamaquoddy Peaceful Relations Advocacy Center • 1-877-853-2613 Penobscot Nation Advocacy Center • (207) 631-4886  <b>Immigrant &amp; Refugee Sexual Assault &amp; Domestic Violence Help</b> Immigrant Resource Center of Maine • (207) 753-0061	
How can an advocate help me?	
<b>An advocate is a trained person who can:</b> <ul style="list-style-type: none"><li>• Give you information about protection orders and help you understand what happens in court;</li><li>• Help you file court paperwork and find legal help;</li><li>• Go with you to your hearing and give you support and information;</li><li>• Help you with other services like housing, counseling, support groups, and mental health help;</li><li>• Help make sure you are safe; and</li><li>• Provide information on how to file for a protection order if you are under 18.</li></ul>	
Legal Help	
<b>Maine State Bar Association Lawyer Referral Service 1-800-860-1460</b> <a href="http://www.mainebar.org/page/AttorneyRequest">www.mainebar.org/page/AttorneyRequest</a> (\$25 administrative fee to help individuals find a private lawyer; includes a 30-minute consultation.)  <b>Legal Services for the Elderly</b> <b>1-800-750-5353</b> <a href="http://www.mainelse.org">www.mainelse.org</a>	

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