

**PLEASE READ THE FOLLOWING BEFORE GETTING STARTED**

- ❖ **PETITIONER** is the person requesting a TRO
- ❖ **RESPONDENT** is the person you are filing the TRO against
  - If you are filing on behalf of a minor or filing against a minor, please see the Clerk at the Civil Division Service Center for assistance;
  - If the Respondent does not know your home address and telephone number and you do not want the Respondent to have this information, do not put it on the TRO, see the Clerk at the Civil Division Service Center to obtain the Petitioner's Motion to Seal Address and Telephone Number form
  - If you cannot pay the filing fee of \$15.00 due to extreme financial hardship, inform the Clerk at the Civil Division Service Center for the Request for Relief from Court Costs; Declaration; Order form

When filing for relief from costs and the Judge denies your application, the Judge will not review your TRO until payment of \$15.00 (non-refundable) is made, and this may delay the processing of your TRO.

- Each adult Petitioner must prepare his or her own Declaration or Statement. If needed additional pages may be attached to the TRO.

**NOTE:**

If you file your TRO by 12:00 PM, your TRO may be picked up any time between 3:00 PM to 4:15 PM on the same day.

If you file your TRO after 12:00 PM, your TRO may be picked up on the following workday day between 10:00 AM to 4:15 PM

**ALL TRO HEARINGS ARE HEARD IN THE HONOLULU DIVISION,  
1111 ALAKEA ST. 10<sup>TH</sup> FLOOR COURTROOM B AT 8:30AM**

**PETITION FOR EX PARTE TEMPORARY RESTRAINING ORDER AND FOR INJUNCTION AGAINST HARASSMENT; DECLARATION OF PETITIONER; TEMPORARY RESTRAINING ORDER AGAINST HARASSMENT; AND NOTICE OF HEARING**

SAMPLE

IN THE DISTRICT COURT OF THE FIRST CIRCUIT  
 Refer to \* Based upon Petitioner's address  
 the map DIVISION  
 STATE OF HAWAII

Petitioner(s)  
 Your Name(s)  
 (person(s) filing the TRO)

Reserved for Court Use  
 Civil No. 1SS  
 will be assigned upon payment

Respondent(s) (if known, list Address, Telephone for each respondent)  
 Person(s) you are filing against  
 street address  
 city, state, zip code

Petitioner(s)/Petitioner(s)' Attorney (Name, Attorney Number, Firm Name (if applicable), Address, Telephone and Facsimile Numbers)  
 Your Name(s)  
 address  
 city, state, zip code  
 telephone number(s)

**PETITION FOR EX PARTE TEMPORARY RESTRAINING ORDER AND FOR INJUNCTION AGAINST HARASSMENT**

This Petition is made pursuant to Hawai'i Revised Statutes section 604-10.5 and the following statement:

- The Petitioner(s) is a resident(s) of the Division of the above District and Circuit, State of Hawai'i.
- Based upon the attached Declaration of Petitioner(s), Petitioner(s) ask(s) for:
  - An ex parte temporary restraining order not to exceed a period of ninety (90) days for protection enjoining Respondent(s) and any other person(s) acting on Respondent(s)' behalf from:
    - contacting, threatening, or physically harassing
      - Petitioner(s)  any person(s) residing at Petitioner(s)' residence
      - telephoning Petitioner(s)
      - entering or visiting Petitioner(s)'  residence, including yard and garage and  place of employment.
    - b. An order of an Injunction not to exceed a period of three (3) years, enjoining Respondent(s) and any other person(s) acting on Respondent(s)' behalf from committing those acts set forth in paragraph 2a. hereof.
    - c. An order prohibiting Respondent(s) from owning or possessing firearm(s) and/or ammunition
    - d. An order awarding reasonable attorney's fees and costs to Petitioner(s) and such further relief as the Court deems just and appropriate.

} Read each item and mark each box(es)

(continued on reverse side)

today's date  
 Date:

Signature of Petitioner(s): Your signature(s) (all adults must sign)  
 Print/Type Name(s): Print your name(s)

SEE REVERSE SIDE

I certify that this is a full, true, and correct copy of the original on file in this office.  
 \_\_\_\_\_  
 Clerk, District Court of the above Circuit, State of Hawai'i