



CIRCUIT COURT DISTRICT COURT OF MARYLAND FOR _____

City/County

Located at _____ Court Address Case No. _____

Name of Petitioner on Original Court Order vs. Name of Respondent on Original Court Order

Street Address, Apt. No. Street Address, Apt. No.

City, State, Zip City, State, Zip

Home Telephone No. Work Telephone No. Home Telephone No. Work Telephone No.

**ADDENDUM TO PETITION FOR PROTECTIVE ORDER
(DESCRIPTION OF RESPONDENT)**

Failure to provide information on this Addendum may prevent law enforcement from processing the Court's Protective Order. This may endanger your safety or the safety of another protected party. Please provide as much information as possible.

**DESCRIPTION OF RESPONDENT
(Alleged Abuser)**

Full Name:				Date of Birth:		Approximate Age:	
Race:	Sex:	Height:	Weight:	Hair Color:	Eye Color:	Skin Tone (Light/Medium/Dark):	
Scars, Tattoos (where on body and description):							
Home Address:							
City, State, Zip:							
Telephone/Cell Number:							
Employer:						Work Hours:	
Work Address:							
City, State, Zip:						Telephone Number:	
Vehicle Make:	Model/Color:		Year:	Tag #:	State:		
Weapons:							
Other locations or information about respondent:							

PETITIONER

(Person Requesting Assistance)

Full Name:				Date of Birth:		Age:	
Race:	Sex:	Height:	Weight:				

INFORMATION ABOUT OTHER PERSONS PETITIONER WANTS PROTECTED

Full Name:	Race:	Sex:	Date of Birth:	Weight:	Approx. Age:
Full Name:	Race:	Sex:	Date of Birth:	Weight:	Approx. Age:
Full Name:	Race:	Sex:	Date of Birth:	Weight:	Approx. Age:
Full Name:	Race:	Sex:	Date of Birth:	Weight:	Approx. Age:

Petitioner's Signature: _____ Date: _____

Petitioner's Telephone Number: _____