



CONFIDENTIAL

☐ CIRCUIT COURT ☐ DISTRICT COURT OF MARYLAND FOR _____
City/County

Located at _____ Case No. _____
Court Address

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

Address Home: _____
City, State, Zip Work: _____
Telephone Number(s) _____
City, State, Zip Telephone Number(s) _____

**PETITION TO ☐ MODIFY ☐ RESCIND ☐ EXTEND EXTREME RISK PROTECTIVE ORDER
(Public Safety § 5-606)**

I, _____, am the ☐ petitioner ☐ respondent in the above entitled case.
I ask this court to:

☐ modify the Extreme Risk Protective Order in this case dated _____ as follows:

My reasons are: _____

☐ rescind the Extreme Risk Protective Order in this case dated _____
My reasons are: _____

☐ extend the Extreme Risk Protective Order up to six (6) months for good cause.
My reasons are: _____

Date Signature

Printed Name

CERTIFICATE OF SERVICE

I hereby certify that on the _____ day of _____, _____, I mailed a copy of this
petition to: _____
Month Year

Name and Address

Name and Address

Date Signature

**ORDER REGARDING PETITION TO MODIFY, RESCIND, OR EXTEND
EXTREME RISK PROTECTIVE ORDER**

After consideration of the petition, and after the respondent and all affected persons are notified, it is
this _____ day of _____, _____, ORDERED that:
Month Year

- ☐ this matter be scheduled for a modification hearing.
☐ this matter be scheduled for a hearing to rescind.
☐ this matter be scheduled for a hearing to extend within 30 days from the filing of this petition. If the
hearing date must be scheduled after the expiration of the original Extreme Risk Protective Order,
the original terms are to remain in full force and effect until the hearing for this petition is held.
☐ the petition is denied because _____

Date Judge ID Number