



CONFIDENTIAL

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

Address Home: Address Home:
Work: Work:
City, State, Zip 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: _____
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:

- 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