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

Located at _____ Telephone _____
Court Address

Case No. _____

_____ vs. _____
Petitioner   Respondent

REQUEST TO SHIELD DENIED OR DISMISSED PEACE ORDER RECORDS
(Courts and Judicial Proceedings § 3-1510(b)(1))

NOTE: Use this form to ask the court to shield from public inspection information in a <u>peace order</u> proceeding in which the court <u>denied or dismissed</u> the case. Do NOT use this form for protective order cases or in cases in which the court granted a final peace order. The court will schedule a hearing and notify you and the other party.

I am the ☐ petitioner ☐ petitioner's employee _____ ☐ respondent in this matter.
Name

On _____, the court denied or dismissed a Petition for Peace Order Records
Date

at the ☐ interim ☐ temporary ☐ final peace order stage.

Check one:

☐ At least three (3) years have passed between the denial or dismissal of the peace order and the filing of the request to shield; OR ☐ I have attached a General Waiver and Release (form CC-DC-077) of all related tort claims.

All of the following statements are true:

✓ The court has not previously issued a final peace or protective order against the respondent in any proceeding between the petitioner or petitioner's employee, and the respondent.

✓ The respondent has not been found guilty of a crime arising from an act against the petitioner or petitioner's employee, as described in C&JP § 3-1503(a).

✓ At the time of the hearing, there are no interim or temporary peace or protective orders pending against the respondent in a proceeding between the petitioner or petitioner's employee, and the respondent.

✓ At the time of the hearing, there are no criminal charges pending against the respondent arising from an alleged act against the petitioner or petitioner's employee, as described in C&JP § 3-1503(a).

I request that the court order the shielding of all court records relating to the above-referenced proceeding.

_____   _____
Date   Petitioner / Petitioner's Employee / Respondent Signature

_____   _____
Address   Printed Name

_____   _____
City, State, Zip   Telephone Number   E-mail

CERTIFICATE OF SERVICE

I certify that I served a copy of this petition upon the following party or parties by ☐ mailing first-class mail, postage prepaid ☐ hand delivery, on _____ to:
Date

_____   _____
Name   Address

                                            _____
                                            City, State, Zip

_____   _____
Name   Address

                                            _____
                                            City, State, Zip

_____   _____
Date   Signature of Party Serving

OR   ☐ I have filed the attached Motion for Service by Clerk (form CC-DC-PO-019).

_____   _____
Date   Signature

CC-DC-PO-016A (Rev. 03/2022)   **RSHPO**