Judge Time _____ _____
Hours Minutes

MARYLAND JUDICIARY ☐ **CIRCUIT COURT** ☐ **DISTRICT COURT OF MARYLAND FOR** .....
City/County

Located at.....Case No. .....
Court Address

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

....
Street Address, Apt. No. Home: Work: Street Address, Apt. No. Home: Work:

....
City, State, Zip Code Telephone City, State, Zip Code Telephone

PETITION TO MODIFY/RESCIND PROTECTIVE ORDER

I,....., the ☐ Respondent, ☐ Petitioner, ☐ Person Eligible For Relief in the above entitled case, ask this Court to:

☐ modify the Protective Order in this case dated .....as follows:

.....

.....

.....

☐ rescind the Protective Order in this case dated .....

My reasons are:.....

.....

.....

.....

....
Date Signature

.....
Street Address (unless confidential) Home: Work:

.....
City, State, Zip Code Telephone

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 OF COURT

It is this..... day of....., ..., ORDERED that:
Month Year

☐ this matter be scheduled for a hearing.

☐ the Petition is DENIED because.....

.....

.....
Judge

Reset Form