

Mark this box if this form contains Restricted Information.

  CIRCUIT COURT  DISTRICT COURT OF MARYLAND FOR \_\_\_\_\_ City/County

Located at \_\_\_\_\_ Court Address Case No. \_\_\_\_\_

Petitioner \_\_\_\_\_ vs. Respondent \_\_\_\_\_

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. \_\_\_\_\_

**REQUEST TO WITHHOLD MY ADDRESS FROM PUBLIC ACCESS**

**(Domestic Violence Protective Order Petitions Under Family Law § 4-504(b)(2))**

**MDEC counties only: If this submission contains Restricted Information (confidential by statute, rule or court order) you must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (form MDJ-008) with this submission, and check the Restricted Information box on this form.**

1. I am the petitioner in the above captioned Domestic Violence Protective Order case.

2. Disclosing my address would place me in risk of further harm because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. I request that my address be stricken from the petition, or withheld / omitted from all related documents filed with the commissioner or court.

4. So that the other party is able to serve me with pleadings and documents, I designate the following person, who has consented to act as my agent, and address:

\_\_\_\_\_  
Name Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Date Petitioner

**NOTICE: Remote access to the name, address, telephone number, date of birth, e-mail address and place of employment of a victim or non-party witness is subject to blocking in accordance with Md. Rule 16-918.**

**If your request is denied, you have the right to file a Motion to Seal or Otherwise Limit Inspection of a Case Record Under Rule 16-934(b)(1)(A) (form CC-DC-053).**