



**Notice:** Pursuant to *T.C.A. §36-3-608* and the attached *Order*, the *Order of Protection* entered on \_\_\_\_\_ remains in full force and effect pending this hearing and further orders of the Court.

Comes now Petitioner, \_\_\_\_\_, and swears and affirms, pursuant to *T.C.A. §36-3-605(d) et seq.*, and *§36-3-608*, and moves this Honorable Court to modify/extend the *Order of Protection* entered by this Court on \_\_\_\_\_ for:

☐ One year, and Petitioner, upon notice to Respondent, may request a continuation of the *Order*. This is requested because:

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

☐ Five years based on an initial violation of the *Order of Protection*. This is requested because:

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

☐ Ten years based on a second or subsequent violation of the *Order of Protection*. This is requested because:

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

☐ **Transfer the billing responsibility for and rights to wireless telephone number(s).**

Pursuant to *T.C.A. §36-3-627*, please issue an Order directing \_\_\_\_\_, a wireless telephone service provider, to transfer the billing responsibility for and rights to the wireless telephone number(s) of Petitioner since Petitioner is not the account holder.

***NOTE: If the Judge makes this Order, you will be financially responsible for the transferred wireless telephone number or numbers, including the monthly service costs and costs of any mobile device associated with the wireless telephone number or numbers. You may be responsible for other fees. Before checking this box, contact the wireless service provider to find out what fees you will be responsible for and whether you are eligible for an account.***

☐ Other relief requested.

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

STATE OF TENNESSEE   )  
COUNTY OF DAVIDSON   )

\_\_\_\_\_, Petitioner, being first duly sworn, has read the foregoing Motion, knows the contents thereof, and states that the same is true and correct to the best of Petitioner's knowledge, information and belief.

\_\_\_\_\_  
PETITIONER

Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC / DEPUTY CLERK

My Commission Expires: \_\_\_\_\_



To request an ADA accommodation, please contact Dart Gore at 880-3309.

## NOTICE OF HEARING

**IF YOU NEED A TRANSLATOR FOR THE HEARING, IMMEDIATELY NOTIFY DART GORE AT (615) 880-3309.**

**To the Respondent:**

Notice is hereby given to you that the above named Petitioner shall appear requesting the Court to modify and/or extend the *Order of Protection* previously entered in this cause and to award the relief prayed for in the *Motion to Modify/Extend Order of Protection*.

**IF YOU WANT TO TELL YOUR SIDE TO THE JUDGE, YOU MUST BE AT THE HEARING. IF YOU DO NOT COME TO THE HEARING, THE JUDGE WILL DECIDE BASED ONLY ON THE PETITIONER'S TESTIMONY.**

The motion hearing will be held in General Sessions Court, Justice A.A. Birch Building, 408 Second Avenue North, Nashville, TN 37201, in **Courtroom** \_\_\_\_\_.

**Date of Hearing:** \_\_\_\_\_, 20\_\_\_\_, at 9:15 a.m.

I hereby certify that I have sent a copy of the foregoing *Motion*, *Notice of Hearing*, and *Temporary Order Extending Order of Protection* by fax to the Davidson County Sheriff's Office and by U.S. mail postage pre-paid, to the Respondent at his or her last known address: \_\_\_\_\_

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

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

RICHARD R. ROOKER, Clerk

By: \_\_\_\_\_  
Deputy Clerk



To request an ADA accommodation, please contact Dart Gore at 880-3309.

IN THE GENERAL SESSIONS COURT FOR DAVIDSON COUNTY, TENNESSEE

\_\_\_\_\_  
Petitioner

vs.

Docket No. \_\_\_\_\_

\_\_\_\_\_  
Respondent

**ORDER TO MODIFY/EXTEND**

This cause came to be heard on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, upon the *Motion to Modify/Extend the Order of Protection* of Petitioner/Respondent previously entered by the Court on \_\_\_\_\_ (date), and upon statements made in open Court, it appears to the Court that the *Motion* is well taken and should be granted.

**IT IS, THEREFORE, ORDERED, ADJUDGED AND DECREED:**

1) That the *Order of Protection* previously entered by this Court shall be extended for an additional  
☐ one (1) year, ☐ five (5) years, or ☐ ten (10) years;  
and/or modified as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) ☐ Petitioner and any minor children in the Petitioner's care are the primary users of the wireless telephone number(s): \_\_\_\_\_  
\_\_\_\_\_, and a separate *Order* shall be entered pursuant to T.C.A. §36-3-627, directing \_\_\_\_\_, a wireless telephone service provider, to transfer the billing responsibility for and rights to the wireless telephone number or numbers of Petitioner since Petitioner is not the account holder.

ENTERED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
**JUDGE, Division** \_\_\_\_\_

**CERTIFICATE OF SERVICE**

The Clerk hereby certifies that a true and exact copy of the foregoing *Order* has been ☐ handed or ☐ mailed to the Petitioner, and a copy has been ☐ handed or ☐ mailed to the Respondent at the last known address of: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Deputy Clerk

### MOTION TO MODIFY/EXTEND ORDER OF PROTECTION

1. Your Name: \_\_\_\_\_  
[First] [Middle] [Last] [Suffix]
2. DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ Home/Cell Phone: \_\_\_\_\_
3. Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
4. Work: \_\_\_\_\_ Work Phone: \_\_\_\_\_
5. Work Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
6. Name of other Party: \_\_\_\_\_  
[First] [Middle] [Last] [Suffix]
7. DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ Home/Cell Phone: \_\_\_\_\_
8. Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
9. Work: \_\_\_\_\_ Work Phone: \_\_\_\_\_
10. Work Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_