

Protection Order Response & Declaration Packet

Use this packet if:

- You are a Respondent filing your response to a Protection Order
- You are a Petitioner filing additional documents into your case

IMPORTANT: These instructions/information apply to Pro Se Parties (Parties without a Lawyer) and do not apply to any other COURTS or any CASES other than protection orders.

Your filings must include party names and your case number. Without this information the Clerk will not be able to file your documents. Filings must be single-side - DOUBLE-SIDED filings will be rejected.

THIS PACKET INCLUDES THE FOLLOWING FORMS:

Declaration Form: Write your statement using this form. Make sure it is signed and dated.

Cover Sheet: For documents such as: Police Reports, Photos. All attached documents should be listed on this form.

Return of Service: File with our office after your documents have been served on the other party.

FILING DEADLINE FOR RESPONSES/DECLARATIONS

It is recommended to have your response filed no later than 2 days prior to your scheduled hearing. A working copy will be provided to the judicial officer for consideration in the case. Filings received after this time may not be read or considered by the court due to untimely filing.

HOW TO FILE

The Snohomish County Clerk is currently accepting filings by e-mail, in person or fax per the instructions below. Filings of 25 pages or more must be filed in person at 3000 Rockefeller Avenue, in room 1-530 on the first floor of the Snohomish County Courthouse in Everett. **You will need a total of 4 copies - one for filing, one for service on the respondent, a working copy for the commissioner and one for yourself.**

File by Email: PROTECTION.ORDER@SNOCO.ORG

- **In the subject line please write:** Response / Your Last Name / Case Number / Date of Hearing
- **IMPORTANT:** You must send your filing as an attached **PDF FILE or WORD DOCUMENT**. For security reasons we are unable to access all other file types. This includes attached or embedded image files. We won't be able to access attached photos of documents unless they are scanned as a PDF file. Additionally, we are unable to access documents saved in your personal storage drive. Do not send links to files shared from your Google Drive, iCloud drive etc. **DO NOT SEND MULTIPLE PDF'S in the same e-mail!** We are not responsible for organizing your filing.

File in Person: File in room 1-530 on the 1st floor of Snohomish County Superior Court. Please note that we are prohibited from helping parties draft their pleadings.

File by Fax: Fax filing to 425-388-3127. Please call during business hours to verify that your fax transmission was received.

SERVICE OF DOCUMENTS TO THE OTHER PARTY IS REQUIRED

You must have a copy of your filing served on the other party prior to the hearing. Service must be made by someone over the 18 who is not a party to the case. The server must fill out the Return of Service Form and file it with the court.

Superior Court of Washington, For County of Snohomish

Petitioner and/or Parent on behalf of:

Minor (protected person), **vs.**

Respondent Parent on behalf of :

Minor Respondent (restrained person)

Declaration of _____ **(Name)**
(DCLR)
(Optional Use)
(Clerk's Action Required)

This declaration is made by:

Name: _____

Age: _____

Relationship to the parties in this action: _____

I declare,

(Attach additional single-sided pages if necessary and number them. Use form DVSTMT, Statement.)

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at _____ (city) _____ (state) on _____ (date).

Signature of Declarant

Print or Type Name

SUPERIOR COURT OF WASHINGTON, FOR COUNTY OF SNOHOMISH

Petitioner and/or Parent on behalf of:

NO.

Minor (protected person), **vs.**

COVER SHEET

Respondent Parent on behalf of :

Minor Respondent (restrained person)

ATTACHED HERETO IS:

Superior Court of Washington, For County of Snohomish

_____ Petitioner and/or Parent on behalf of:	No. Return of Service (RTS)
_____ Minor (protected person), vs.	
_____ Respondent Parent on behalf of :	
_____ Minor Respondent (restrained person)	

Identification of server:

1. My name is _____. I am a peace officer 18 years of age or older and not the petitioner or the respondent.

Able to serve:

2. I served _____ (name of minor served)
on _____ (date) at _____ (time) at this
address: _____,
with the documents checked in paragraph 3.

List of documents:

3. I served the:

<input type="checkbox"/> Declaration / Response: _____ _____ _____	<input type="checkbox"/> Other: _____ _____ _____
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NEXT HRG:

Not able to serve:

4. I was unable to make personal service on the respondent. I notified the petitioner that respondent was not served.
- I was unable to make personal service on the petitioner. I notified the respondent that petitioner was not served.
- Personal service was attempted on the following date(s) _____
- _____.
- No service was attempted because _____
- _____
5. **Other:** _____

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Dated: _____ at _____, Washington.

Fees: Service _____	_____
Mileage _____	Signature of Server

	Print or Type Name

Total _____	Law Enforcement Agency

PLEASE RETURN COMPLETED FORMS TO:

MAIL

Snohomish County Clerk's Office
Court Services Division M/S 605
3000 Rockefeller Ave
Everett, WA 98201

IN-PERSON

3000 Rockefeller Ave
1st Floor, Room 1-530

FAX - 425-388-3127

EMAIL - protection.orders@snoco.org

PHONE - 425-388-3638

Superior Court of Washington, For County of Snohomish

Petitioner and/or Parent on behalf of:

Minor (protected person), **vs.**

Respondent Parent on behalf of :

Minor Respondent (restrained person)

No.
Return of Service
(RTS)

Identification of server:

1. My name is _____. I am a peace officer 18 years of age or older and not the petitioner or the respondent.

Able to serve:

2. I served _____ (name of parent served)
on _____ (date) at _____ (time) at this
address: _____,
with the documents checked in paragraph 3.

List of documents:

3. I served the:

<input type="checkbox"/> Declaration / Response: _____ _____ _____	<input type="checkbox"/> Other: _____ _____ _____
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NEXT HRG: _____

Not able to serve:

4. I was unable to make personal service on the respondent. I notified the petitioner that respondent was not served.
- I was unable to make personal service on the petitioner. I notified the respondent that petitioner was not served.
- Personal service was attempted on the following date(s) _____
_____.
- No service was attempted because _____
_____.
5. **Other:** _____

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Dated: _____ at _____, Washington.

Fees: Service _____	_____
Mileage _____	Signature of Server

	Print or Type Name
Total _____	_____
	Law Enforcement Agency

PLEASE RETURN COMPLETED FORMS TO:

MAIL

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Court Services Division M/S 605
3000 Rockefeller Ave
Everett, WA 98201

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