**IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT,**

**IN AND FOR SEMINOLE COUNTY, FLORIDA**

 ,

 Petitioner

 (Law Enforcement Officer/Agency)

 Case No.:

v. Division:

 ,

 Respondent

**ORDER SETTING HEARING ON PETITIONER’S**

**MOTION TO EXTEND FINAL RISK PROTECTION ORDER**

This cause came before the Court upon Petitioner’s Motion to Extend Final Risk Protection Order and the Court, having reviewed the file, **ORDERS** as follows:

**NOTICE OF HEARING**

 The hearing on the Motion to Extend Final Risk Protection Order will be held in Courtroom \_\_\_\_\_, in the court facility located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_\_\_\_\_\_\_ A.M./P.M. At this hearing, the Court will determine if the final risk protection order should be extended or if the final risk protection order will be allowed to expire.

**To the Respondent:** A hearing will be held on the date and at the time noted above to determine if the final risk protection order should be extended. Failure to appear at that hearing may result in a court issuing a risk protection order against you which is valid for up to 1 year. You may seek the advice of an attorney as to any matter connected with this order.

 **DONE AND ORDERED** at Sanford, Seminole County, Florida, on DDDD

JJJJ

I CERTIFY the foregoing is a true copy of the original order as it appears on file in the office of the Clerk of the Circuit Court of Seminole County, Florida, and that I have furnished copies of this order as indicated below.

By:

*{Deputy Clerk or Judicial Assistant}*

*Copies furnished to:*

Petitioner (or his or her attorney):

\_\_\_\_ by email

\_\_\_\_ by hand-delivery in open court (Petitioner acknowledged receipt in writing on the face of the original order – see below.)

\_\_\_\_ by certification by clerk (Petitioner failed or refused to acknowledge receipt of a certified copy.)

\_\_\_\_ by mail to last known address

ACKNOWLEDGMENT

I, *[name of petitioner]*, acknowledge receipt of a certified copy of this Order Setting Hearing on Petitioner’s Motion to Extend Final Risk Protection Order.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*[Name of petitioner]*

Respondent (or his or her attorney):

\_\_\_\_ by email

\_\_\_\_ by hand-delivery in open court (Respondent acknowledged receipt in writing on the face of the original order – see below.)

\_\_\_\_ certification by clerk (Respondent failed or refused to acknowledge receipt of a certified copy.)

\_\_\_\_ by mail to last known address

ACKNOWLEDGMENT

I, *[name of respondent]*, acknowledge receipt of a certified copy of this Order Setting Hearing on Petitioner’s Motion to Extend Final Risk Protection Order.

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*[Name of respondent]*

Section 790.401, Florida Statutes, does not require the court to record a hearing on a motion to extend a risk protection order; however, any party may arrange for a court reporter to record the hearing and to prepare a written transcript of the hearing at that party’s expense. Arrangements for a court reporter must be made in advance.In the event of an appeal, the appealing party will be required to provide the court with a written transcript of what was said at the hearing.

Respondent has a responsibility to keep the court informed, in writing, of any change of address. Failure to do so may jeopardize Respondent’s rights.

**If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the ADA Coordinator at Seminole Court Administration, 301 N. Park Avenue, Suite N301, Sanford, Florida 32771-1292, (407) 665-4227 at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days. If you are hearing or voice impaired, call 711.**