



*Sherri Adelstein*  
Denton County District Clerk

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TO: ALL ATTORNEYS OR PROSE PERSONS FILING AN APPLICATION FOR A DOMESTIC PROTECTIVE ORDER IN FAMILY VIOLENCE CASES

DATE: December 17, 2012

RE: PROTECTIVE ORDERS

There are several requirements which need to be completed by the applicant or the applicant's attorney when filing an Application for Domestic Protective Order. An Emergency Protective Order, Temporary Ex Parte Protective Order, and Protective Order are valid as soon as they are signed and are to be entered into TCIC.

1. When you file your Application for Protective Order you **must** provide the clerk with the completed "TCIC form" and "Protected Person Information Sheet" included in this packet or located on the District Clerk Website. This information is necessary to insure the proper person gets served, the data gets entered into TCIC system and for the safety of the Applicant and the applicant's children.
2. Please notify the clerk of the court if the Respondent is active duty military. (Please see attached document).
3. You must notify the clerk whether the person who has a Protective Order against them has a license to carry a handgun. You must also state this in your order:

**"IT IS UNLAWFUL FOR ANY PERSON, OTHER THAN A PEACE OFFICER AS DEFINED BY SECTION 1.07 OF THE PENAL CODE, ACTIVELY ENGAGED IN EMPLOYMENT AS A SWORN, FULLTIME PAID EMPLOYEE OF A STATE AGENCY OR POLITICAL SUBDIVISION, WHO IS SUBJECT TO A PROTECTIVE ORDER TO POSSESS A FIREARM OR AMMUNITION"**

4. The applicant or the applicants attorney **shall** provide the clerk with the name and address of each law enforcement agency, child-care facility, and school to which the clerk is required to mail a copy of the order. See Family Code Sec 85.042 (d) (1)

**It is necessary we have your cooperation in the filing of your protective order to insure the prompt delivery to the proper authorities for the protection of you or your client.**

Thank you for your assistance.

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**NOTICE OF ACTIVE DUTY MILITARY**

**CAUSE NO.** \_\_\_\_\_

**RESPONDENT'S NAME:** \_\_\_\_\_

**RESPONDENT'S ADDRESS:** \_\_\_\_\_

  
\_\_\_\_\_

**RESPONDENT IS ACTIVE DUTY MILITARY OR RESERVE:** (circle one) **YES** **NO**

If yes to the above question, please answer the following question.

**RESPONDENT SERVES IN WHAT BRANCH OF THE MILITARY?** (circle one)

**ARMY      NAVY      AIR FORCE      MARINE CORPS      COAST GUARD**