

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

\_\_\_\_\_,  
Petitioner  
(Law Enforcement Officer/Agency)

Case No.: \_\_\_\_\_

v.

Division: \_\_\_\_\_

\_\_\_\_\_,  
Respondent

**PETITIONER'S MOTION TO EXTEND FINAL RISK PROTECTION ORDER**

COMES NOW, the Petitioner, pursuant to s. 790.401(6)(c), Florida Statutes, and hereby requests the Court to extend the final risk protection order in this case for a period of \_\_\_\_\_, and as grounds alleges that:

1. A Final Risk Protection Order was entered in this case on \_\_\_\_\_.
2. The Final Risk Protection Order expires on \_\_\_\_\_, which is within 30 days from today's date.
3. The grounds for the extension of the Final Risk Protection Order are as follows:

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

(Attach an affidavit or additional pages if necessary.)

Respectfully submitted this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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Signature of Petitioner

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Name of person filing petition

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Law Enforcement Agency

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Service address

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Email address

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Telephone Number

**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that a true and correct copy of this Motion to Extend Final Risk Protection Order was served on Respondent by (enter service method) at (enter address), this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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Signature of Petitioner

Section 790.401, Florida Statutes, does not require the court to record a hearing on 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 [identify applicable court personnel by name, address, and telephone number] 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.**