

## Request for Change of No Contact Order

If a no contact order has been put in place, by this Court, and you are requesting to have the no contact order lifted, you must submit a written request for the order to be lifted and complete the paperwork for a Safety Assessment. Prior to the Court making a decision on your request you will be required to attend, participate in and complete a Safety Assessment. When the paperwork is complete with the Clerk's office we will contact the victim and then the Safety Assessment may be scheduled.

Request for No Contact Order to be lifted

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

I, \_\_\_\_\_, hereby request that the no contact order in effect be released.

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Victim

Date: \_\_\_\_\_

IN THE VAN WERT MUNICIPAL COURT, VAN WERT COUNTY OHIO

STATE OF OHIO  
Plaintiff

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

**REQUEST FOR CHANGE OF  
NO CONTACT BOND  
REQUIREMENT AND AGREEMENT**

\_\_\_\_\_  
Defendant

I, \_\_\_\_\_, alleged victim in the above captioned case, hereby request that the “no contact with victim” condition of the Defendant’s bond be terminated. Prior to the Court granting my request, I hereby agree to attend, participate in, and complete a Safety Assessment.

I understand the Safety Assessment will consist of (1) personal session with Counseling Offices of Van Wert, 1054 S Washington St, Suite B, Van Wert, Ohio. I will contact **419-238-1000** to arrange said Safety Assessment.

I further understand that the Court will not grant my request until I provide proof of satisfactory completion of the above Safety Assessment. I further understand that I may be required to appear before the Court for a hearing on this matter before my request is granted.

Acknowledged By:

\_\_\_\_\_  
Victim/Witness Advocate

\_\_\_\_\_  
Alleged Victim

\_\_\_\_\_  
City Law Director/Asst. City Law Dir.

\_\_\_\_\_  
Date

