

Mark this box if this form contains Restricted Information.



CIRCUIT COURT  DISTRICT COURT OF MARYLAND FOR \_\_\_\_\_ City/County

Located at \_\_\_\_\_ Telephone \_\_\_\_\_

Court Address \_\_\_\_\_

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

Petitioner \_\_\_\_\_ VS. Respondent \_\_\_\_\_

Street Address, Apt. No. \_\_\_\_\_ Street Address, Apt. No. \_\_\_\_\_

City, State, Zip \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Telephone No. \_\_\_\_\_ Work Telephone No. \_\_\_\_\_ Home Telephone No. \_\_\_\_\_ Work Telephone No. \_\_\_\_\_

**REQUEST TO SHIELD CONSENTED-TO PROTECTIVE ORDER RECORDS  
(Family Law § 4-512(b)(2))**

**NOTE:** Use this form to ask the court to shield from public inspection information in a protective order case in which the respondent agreed to the order without a trial. Do not use this form for peace order cases or in final protective order cases in which the court denied or dismissed the request. The court will schedule a hearing and notify you and the other party.

**If this submission contains Restricted Information (confidential by statute, rule or court order) you must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (form MDJ-008) with this submission, and check the Restricted Information box on this form.**

**Check one:**

On \_\_\_\_\_, the respondent consented to a Petition for Protection from Domestic Violence;  
OR Date

On \_\_\_\_\_, the respondent consented to Petition for Protection from Domestic  
Date  
Violence AND is refiling this request more than one (1) year from a prior hearing to shield.

**Check one:**

At least three (3) years have passed between the consent to entry of the protective order and the filing of the request to shield; OR  I have attached a General Waiver and Release (form CC-DC-077) of all related tort claims.

**All of the following statements are true:**

- ✓ The protective order has expired.
- ✓ The respondent did not violate the protective order.
- ✓ The court has not previously issued a final protective or peace order against the respondent in any proceeding between the petitioner and the respondent.
- ✓ The respondent has not been found guilty of a crime arising from abuse against the petitioner.
- ✓ At the time of the hearing there are no interim or temporary protective or peace orders pending against the respondent in a proceeding between the petitioner and the respondent.
- ✓ At the time of the hearing there are no criminal charges pending against the respondent arising from alleged abuse against the petitioner.

I request that the court order the shielding of all court records relating to the above-referenced proceeding.

\_\_\_\_\_ Date \_\_\_\_\_ Petitioner / Respondent Signature

\_\_\_\_\_ Telephone \_\_\_\_\_ Street Address

\_\_\_\_\_ E-mail \_\_\_\_\_ City, State, Zip

**CERTIFICATE OF SERVICE**

I certify that the following party, parties, or attorney(s) was/were served with a copy of this Request to Shield Consented-To Protective Order Records as indicated:

**Person served** (note if attorney): \_\_\_\_\_

Address of the person served: \_\_\_\_\_

Service method:  first-class mail on \_\_\_\_\_  hand delivery on \_\_\_\_\_  
Date Date

service on registered user via MDEC system on the effective date of filing.

OR  I have filed the attached Motion for Service by Clerk (form CC-DC-DV-025).

\_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_ Attorney Number

For additional person(s) served, please attach completed form CC-DC-128 (Certificate of Service).