



CIRCUIT COURT DISTRICT COURT OF MARYLAND FOR _____

Located at _____ Court Address Case No. _____ City/County

_____ vs. _____
Petitioner Respondent

**REQUEST TO SHIELD DENIED OR DISMISSED PEACE ORDER RECORDS
(Courts and Judicial Proceedings § 3-1510(b)(1))**

NOTE: Use this form to ask the court to shield from public inspection information in a peace order proceeding in which the court denied or dismissed the case. Do NOT use this form for protective order cases or in cases in which the court granted a final peace order. The court will schedule a hearing and notify you and the other party.

On _____, the court denied or dismissed a Petition for Peace Order Records
Date
at the interim temporary final peace order stage.

Check one:

- At least three (3) years have passed since the date of the denial or dismissal; 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 court has not previously issued a final peace or protective order against this respondent in any proceeding between this petitioner and this respondent.
- ✓ The respondent has not been found guilty of a crime arising from an act against this petitioner, as described in C&JP § 3-1503(a).
- ✓ At the time of the hearing, there are no interim or temporary peace or protective orders pending against this respondent in a proceeding between this petitioner and this respondent.
- ✓ At the time of the hearing, there are no criminal charges pending against this respondent arising from an alleged act against this petitioner, as described in C&JP § 3-1503(a).

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

_____ Date
_____ Petitioner / Respondent Signature
_____ Address
_____ City, State, Zip
_____ Telephone Number

CERTIFICATE OF SERVICE

I certify that I served a copy of this petition upon the following party or parties by mailing first class mail, postage prepaid hand delivery, on _____ to:
Date

_____ Name _____ Address
_____ City, State, Zip
_____ Name _____ Address
_____ City, State, Zip
_____ Date _____ Signature of Party Serving

OR I have filed the attached Motion for Service by Clerk form (CC-DC-PO-019).

_____ Date _____ Signature