

**STATE OF NORTH CAROLINA**

File No.

In The General Court Of Justice  
District Court Division

\_\_\_\_\_ County

Name Of Defendant

Street Address Of Defendant (Not P.O. Box)

City

State

Zip

**IDENTIFYING INFORMATION  
ABOUT DEFENDANT  
DOMESTIC VIOLENCE ACTION**

G.S. 50B-3(d)

**INSTRUCTIONS:** *In order to assist law enforcement agencies in serving and enforcing this Order, if issued by the Court, the following information is requested. It is not required for the issuance of this Order, but may allow law enforcement agencies to locate and more quickly identify the persons involved in this case and to enforce the provisions of this Order more effectively. Answer these questions accurately and honestly.*

**If you do not know the answer to any of the following questions, leave the question blank.**

**INFORMATION ABOUT DEFENDANT**

Date Of Birth

Race:  White  Black  Indian  Asian/Pacific Islander  OtherSex:  Male  Female

Height

Weight

Hair Color

Eye Color

Identifying Marks (List any marks, scars, tattoos)

Does the defendant have a driver's license or state-issued identification card from any state?  Yes  No

If yes, provide the state and number if possible: State: \_\_\_\_\_ Number: \_\_\_\_\_

Vehicle description and license plate number: \_\_\_\_\_

Social Security No. Of Defendant

Telephone No. Of Defendant

The defendant's current work information:

Employer's Business Name

Business Address

Business Telephone No.

Defendant's Work Hours (List Work Start Time And Work Stop Time)

Does the defendant have a permit to purchase a handgun or crossbow?  Yes  No

If yes, state which law enforcement agency issued the permit, if known: \_\_\_\_\_

Does the defendant have a permit to carry a concealed handgun?  Yes:  No

If yes, state which law enforcement agency issued the permit, if known: \_\_\_\_\_

Is there any reason that a law enforcement officer should consider the defendant a potential threat (*i.e., carries concealed weapons while drinking alcohol, has threatened an officer, etc.*)?  Yes  No

If yes, specify the circumstances:

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**PLAINTIFF**

Date Of Birth

Race:  White  Black  Indian  Asian/Pacific Islander  OtherSex:  Male  Female

Date

Name Of Plaintiff (Type Or Print)

Signature Of Plaintiff

**NOTE TO CLERK OR MAGISTRATE:** *If an order is issued, a copy of this form should be attached to the appropriate order and forwarded to the sheriff of the issuing court county.*