S	TATE C	OF NO	ORTH CAI	ROLINA	NC-JOIN No.		File No					
_				_ County		In The General Court Of Justice District Court Division						
IN THE MATTER OF												
Name And Address Of Juvenile							JUVENILE PETITION MISDEMEANOR TRESPASS (DELINQUENT)					
Juve	enile's Date Of L	Birth	Age	Race	Sex	G.S. 7B-1501(7), -1801, -1802						
Nan	ne Of Petitioner		1			Cat	egory Of Offense					
								nor, Class		_		
Offe	nse Code	Offense	In Violation Of G.S.	Physical Addre	ess Of Offense, If Appl	icable		Date Of Offense	Time Of O	Offense	AM	
alle	ege that: The juvenile	named	above committe	ed a delinque	nt act in this distri	ict wl	en that invokes the juve hile under the age of ei ts, guardian, or custod	ghteen (18).		rt, and the	erefore	
	Name			Relationship/Title		Add	Address		Telepho	one No.		
3. The juvenile is a delinquent juvenile as defined by G.S. 7B-1501(7) in that on or about the date of offense shown and in the named above, the juvenile unlawfully and willfully:										n the cou	nty	
	 I. FIRST DEGREE TRESPASS [G.S. 14-159.12] did without authorization enter and remain in the building of located at											
	on the premises of											
	did	without		ter and rema	in on the premise							
after the juvenile had been notified not to enter and remain there by												
							ant or other authorized to the attention of intrud		not to ent	ter the pre	emises.	

I request the Court to hear the case to determine whether the allegations are true and whether the juvenile is within the jurisdiction of the Court as a delinquent juvenile. **VERIFICATION** Being first duly sworn, I say that I have read the allegations in the petition and that the same are true to my own knowledge, except as to those matters alleged upon information and belief, and as to those, I believe them to be true. Signature Of Petitioner SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME Date Signature Of Person Authorized To Administer Oaths Title Or Relationship To Juvenile Agency (if applicable) Telephone No. Deputy CSC Assistant CSC Clerk Of Superior Court Magistrate Date My Commission Expires Address Notary County Where Notarized City, State, Zip **SEAL** WITNESS(ES) Name **Address** Telephone No. Date Complaint Received By Juvenile Justice Section Of The Division Of Adult Correction And Juvenile Justice 15-DAY EXTENSION OF TIME TO FILE PETITION Pursuant to G.S. 7B-1703, at the discretion of the undersigned chief court counselor, the time to file a petition in the above captioned case is extended 15 days. Date Name Of Chief Court Counselor Signature Of Chief Court Counselor DECISION OF COURT COUNSELOR REGARDING THE FILING OF THE PETITION AM 1. Approved for Filing 2. Not Approved for Filing Name Of Court Counselor Giving Telephonic Approval a. Closed Name And Title Of Person Receiving Telephonic Approval b. Diverted and Retained Date Signature Of Court Counselor Signature Of Person Receiving Telephonic Approval Post-Diversion Approval For Filing Of Petition Signature Of Court Counselor Date Approved for Filing