|  |
| --- |
|  |

**CAUSE NO:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | § | IN THE | |  | |
| APPLICANT | § |  | | | |
|  | § |  | | | |
| VS. | § |  | | | |
|  | § |  | | | |
|  | § | OF |  | | COUNTY, TEXAS |
| RESPONDENT | § |  | | | |

**MOTION REQUESTING REVIEW OF PROTECTIVE ORDER**

**(ISSUED UNDER CHAPTER 85, FAMILY CODE)**

**TO THE HONORABLE JUDGE OF SAID COURT:**

**COMES NOW** the Respondent, pursuant to Section 85.025(b), Family Code, and files this motion to review the Protective Order issued in the above styled and numbered cause.

In support of the motion, the Respondent asserts the following:

|  |  |  |
| --- | --- | --- |
| 1. | Pursuant to Section 85.025(b), Family Code, a person who is the subject of a protective order may file a motion, not earlier than the first anniversary of the date the protective order was issued, requesting the Court to review the protective order and determine whether there is a continuing need for it. If the protective order is effective for a period of more than two years, the person may file a second motion to review no earlier than one year after filing the first motion to review. | |
|  |  | |
| 2. | Section 85.025(b-3), Family Code, does not prohibit the filing of this motion because this motion does not involve a protective order issued under Subchapter A, Chapter 7B, Code of Criminal Procedure. | |
|  |  | |
| 3. | The Court issued the Protective Order in this cause on:   /  /    . | |
|  |  | |
| 4. | The Respondent is the subject of the Protective Order issued in this cause and has waited the requisite period before filing this motion. | |
|  |  | |
| 5. | There is no continuing need for the Protective Order because: |  |
|  |  | |
|  |  | |
|  |  | |
|  | *(Sheet may be attached with additional information*) | |

**WHEREFORE, PREMISES CONSIDERED**, the Respondent prays the Court grant the motion and terminate the Protective Order immediately.

DATE SIGNED:   /  /

|  |  |
| --- | --- |
|  | Respectfully submitted, |
|  |  |
|  |  |
|  |  |
|  | Respondent |
|  |  |
|  |  |
|  |  |
|  | Printed Name |