

FERNDAL MUNICIPAL COURT OF WASHINGTON
FOR WHATCOM COUNTY

CITY OF FERNDAL,)	
)	Case No. _____
vs)	
)	Application to Terminate
_____)	No Contact Order
Defendant)	

I hereby request that the No Contact Order entered against the above named defendant on _____ be terminated in all respects for the following reasons:

Date

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct, and I will appear in court at the time/date below:

Hearing Date: _____ **10:00 a.m.**

_____ Signature of Applicant

_____ Printed Name of Applicant

_____ Street Address

_____ City, State, Zip

Dated: _____

Please see reverse side

Factors the court will consider in deciding whether to modify or rescind a no contact order include:

- The circumstances of the crime charged
- Status of the criminal case
- Defendant's history of use of violence
- Risk factors for serious violence or lethality
- Defendant's compliance with court orders
- Defendant's compliance with any conditions of pretrial monitoring or probation
- Defendant's progress in treatment or counseling for domestic violence, substance issues, mental health, or other concerns
- The expressed wishes of the victim/protected person
- Specific hardships created for the victim/protected person by the conditions of the no contact order
- Victim's safety plan and access to resources and support