

For Clerk's Use Only

Name of Lawyer: _____

Lawyer's Address: _____

Lawyer's Telephone: _____

Lawyer's Email: _____

Lawyer's Bar Number: _____

Lawyer for Victim or Defendant

**SUPERIOR COURT OF ARIZONA
IN MOHAVE COUNTY**

Plaintiff

Case Number: _____

Defendant

**MOTION TO DISMISS ORDER FOR
LIFETIME NO-CONTACT
INJUNCTION (A.R.S. § 13-719)**

I am the victim or the authorized filer, the defendant, or lawyer for the defendant.

I request that the court dismiss the order for lifetime no-contact injunction for victim, _____
_____ against defendant, _____, in the above-entitled matter that prohibits
the defendant from contacting the victim during the defendant's life.

1. BASIS OF REQUEST (You may attach any supporting documentation)

If filed on behalf of the defendant:

- a. The defendant was not convicted of a dangerous felony offense as defined in A.R.S. § 13-105; **AND**
- b. The defendant was not convicted of a "serious offense" or "violent or aggravated felony" as defined in A.R.S. § 13-706; **AND**
- c. The defendant was not convicted of a felony offense included in Title 13, Chapter 14 or 35.1; **AND**
- d. The defendant was not convicted of a felony offense as set forth in A.R.S. § 13-1204(B); **AND**

e. The defendant was not convicted of a felony offense as set forth in A.R.S. § 13-2923.

OR

f. The victim has died.

g. The conviction has been dismissed, expunged, or overturned or I have been pardoned.

If filed on behalf of the victim:

The victim is requesting that the court dismiss the order for lifetime injunction against the defendant. The victim understands the court may set a hearing to verify the request and is not making the request under duress or coercion.

DATED this _____ day of _____, _____.

Signature

Printed Name