

DOMESTIC RELATIONS IDENTIFICATION SHEET

If the information for a block is unknown place U/K in the block, if it's not applicable place N/A in the block. This information is needed to assist the officer in serving the Respondent as soon as possible. It also may alert the officer to any potential danger that might be encountered while attempting to serve this injunction.

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|--|-------|---------|--|------------|-------------------------------|---|------------------------|------------|-------|------------------------------|--|
| Date: | | Case #: | | | | | | | | | |
| Respondent's Last Name: | | | | | First Name: | | | | | Middle Name: | |
| Aliases: | | | | | Tattoos, Scars, and/or Marks: | | | | | Respondent's Place of Birth: | |
| Date of Birth: | Age: | Sex: | Hair Color: | Eye Color: | Height: | Weight: | Race: | Skin Tone: | | | |
| Duval County address where the officer may serve the Respondent: | | | | | | Zip Code: | Telephone: | Cell: | | | |
| Work address where the officer may serve the Respondent: | | | | | | Work Days and Hours: | | | | | |
| Business Name: | | | | | | | Work Telephone: | | | | |
| Alternative address (known relative, friend, etc.) where the respondent may be served at if a Duval County or work address above is unknown: | | | | | | Zip Code: | Alternative Telephone: | | | | |
| Vehicle year: | | | Make: | | Model: | | Color: | | Tag: | | |
| Is the respondent known to carry a weapon? <input type="checkbox"/> YES or <input type="checkbox"/> NO | | | If so, what type of weapon(s)? | | | Does the respondent have any mental health issues? <input type="checkbox"/> YES or <input type="checkbox"/> NO | | | | | |
| Is the respondent in jail? <input type="checkbox"/> YES or <input type="checkbox"/> NO | | | Does the respondent have any warrants, and if so what for? | | | | | | | | |
| Comments: (any information not mentioned above that may help assist the officer in locating the respondent) | | | | | | | | | | | |
| Petitioner's full name: | | | | | | Address: | | | | DOB: | |
| Sex: | Race: | | Home Telephone: | | | Work Telephone: | | | Cell: | | |

Do you wish to keep your address confidential? YES NO (Domestic Violence Petitioners Only)

You may check the service status of your injunction at WWW.COJ.NET or call 630-2141. You'll also be provided with two copies of the injunction; one for your files and the other for service upon the respondent by patrol. You may call 630-0500 to have a patrol unit serve the second copy on the respondent. Please wait 3 days after you injunction has been issued to check upon service of you injunction.