

CAUSE NO. _____

APPLICANT

§
§
§
§
§

IN THE JUSTICE COURT

PRECINCT NO. CW

NOLAN COUNTY, TEXAS

APPLICATION FOR WRIT OF RETRIEVAL

The undersigned Applicant makes this Application for a Writ of Retrieval of personal property found at the following location, which is a residence in which Applicant is, or was previously, authorized to occupy ("Residence"):

LOCATION OF RESIDENCE: _____

Occupant is _____, who is currently occupying the residence and may be given notice of this Application at the above-listed Residence or at the following address(es):

Fax: _____
Phone: _____
E-Mail: _____

The following is a **listing and specific description** of the items that I seek to be allowed to retrieve from the Residence (*Attach separate sheet, if necessary*):

I certify that all of the following statements are true:

- 1) The Items listed in this Application are **ONLY** of the following types: medical records, medicine and medical supplies, clothing, child-care items, legal or financial documents (including electronic records), checks or bank or credit cards in the name of Applicant, employment records, and personal identification documents.
- 2) I will suffer personal harm and/or the personal health and safety of myself or others within my care will likely be at risk if I am unable to retrieve the items, and I have an urgent need to retrieve the items from the Residence.
- 3) I have attached a lease, sworn statement or other documentary evidence showing that I am, or was previously, authorized to occupy the Residence. I am currently unable to enter the Residence because the current occupant named above has denied me access to the Residence or poses a clear and present danger of family violence to myself or my dependents.
- 4) I am not the subject of an active protective order under Title 4, Family Code, a magistrate's order for emergency protection under Article 17.292, Code of Criminal Procedure, or any court order prohibiting my entry into the Residence; or otherwise prohibited by law from entering into the Residence.

Applicant's Signature

Date

Address & Phone Number