

AFFIDAVIT FOR RISK PROTECTION ORDER INVESTIGATION

JD-CR-199 New 6-22
P.A. 21-67 § 1

STATE OF CONNECTICUT
**JUDICIAL BRANCH
SUPERIOR COURT**
www.jud.ct.gov



***This form is available
in other language(s).***

**For information on ADA accommodations,
contact a court clerk or go to: www.jud.ct.gov/ADA.**

Instructions:

1. Complete this Affidavit and swear to the contents and sign it before a Notary Public, Commissioner of the Superior Court, Clerk, or other proper officer.
2. File this completed Affidavit with the Application for Risk Protection Order Investigation (JD-CR-199).

TO: The Superior Court of the State of Connecticut

Name of applicant	Name of person allegedly posing risk	Docket number (For Court Use Only)
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Affidavit for Risk Protection Order Investigation

I, the applicant listed above, state under oath that I have a good faith belief that the person listed above poses a risk of imminent personal injury to himself, herself, or another person because: *(State specific facts that support your belief.)*

Include any facts that show that this person has:

- Committed any recent threats or acts of violence directed toward themselves or another person
- Committed any recent acts of cruelty to animals
- Recklessly used, displayed, or brandished (waved around) a firearm or deadly weapon
- A history of the use, attempted use, or threatened use of physical force against anyone else
- Any history of involuntary confinement in a hospital for people with psychiatric disabilities
- Any illegal use of controlled substances or any abuse of alcohol

I have continued listing facts on page 2.

NOTICE:

You may face criminal penalties if you make any false statement under oath that you do not believe to be true and that you intend to mislead a public servant in the performance of their official function.

I certify that the information stated in this affidavit is true to the best of my knowledge and belief.

Signature of applicant	Print name	Date
Subscribed and sworn to before me	Signed (Clerk, Notary, Commissioner of the Superior Court)	Print name
		Date

Name of applicant	Name of person allegedly posing risk	Docket number <i>(For Court Use Only)</i>
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Affidavit for Risk Protection Order Investigation, continued

I certify that the information stated in this affidavit is true to the best of my knowledge and belief.

Signature of applicant	Print name	Date	
Subscribed and sworn to before me	Signed <i>(Clerk, Notary, Commissioner of the Superior Court)</i>	Print name	Date