

# Exploitation of Vulnerable Adult Injunction

## FORMS

### Exploitation of Vulnerable Adult Injunction

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# Exploitation of Vulnerable Adult Injunction

## Instructions for Petition for Injunction for Protection Against Exploitation of a Vulnerable Adult

If you are a person 18 years of age or older whose ability to perform the normal activities of daily living or to provide for his or her own care or protection is impaired due to a mental, emotional, sensory, long-term physical, or developmental disability or dysfunction, or brain damage, or the infirmities of aging, and you find yourself either in imminent danger of becoming or find yourself to be a victim of exploitation, you can use this form to ask the court for a protective order to protect you and your assets. Because you are making a request to the court, you are called the **petitioner**. The person whom you are asking the court to protect you from is called the **respondent**. In determining whether you have reasonable cause to believe you are in imminent danger of becoming or have become a victim of exploitation, the court must consider all relevant factors alleged in the petition, including but not limited to the following:

1. The association between the petitioner and the respondent.
2. If there is an active Guardianship case.
3. Any reports made to a government agency relating to the abuse, neglect, or exploitation of the vulnerable adult; and the results of any such reports or investigations.
4. The vulnerable adult's dependence on the respondent for care; and any alternative provisions for the vulnerable adult's care in the absence of the respondent.
5. The list of any assets, account, or lines of credit at a financial institution that are requesting to be frozen.

This form should be typed or printed in black ink. You should complete this form (giving as much detail as possible) and sign it in front of a **notary public** or the **clerk of the circuit court** in the county where you live. The clerk will take your completed petition to a judge. The clerk will provide you with a copy for your records. If you need assistance or have any questions, the intake clerk will help you.

### What should I do if the judge grants my petition?

If the facts contained in your petition convince the judge that you are a victim of exploitation, the judge will sign an immediate Temporary Injunction for Protection Against Exploitation of a Vulnerable Adult. A temporary injunction is issued without notice to the respondent. The clerk will give your petition, the temporary injunction, and any other papers filed with your petition to the sheriff or other law enforcement officer for personal service on the respondent. The sheriff or other law enforcement officer will also receive copies of the Order for service on any financial institutions that require the freezing of your assets. The Temporary Order will last until a full hearing can be held or for a period of 15 days, whichever comes first. The court may extend the temporary injunction beyond 15 days for good reason, which may include failure to obtain service on the respondent.

The temporary injunction is issued ex parte. This means that the judge has considered only the information presented by one side—YOU. The temporary injunction gives a date that you must appear in court for a hearing. At that hearing, you will be expected to testify about the facts in your petition. The respondent will also be given the opportunity to testify at this hearing. At the hearing, the judge will decide whether to issue a Final Judgment of Injunction for Protection Against Exploitation of a Vulnerable Adult. The Order will remain in effect for a specific time period or until modified or dissolved

## Exploitation of Vulnerable Adult Injunction

by the court. If either you or the respondent do not appear at the final hearing, the temporary injunction may be continued in force, extended, or dismissed, and/or additional orders may be granted, including but not limited to, entry of a permanent injunction and the imposition of court costs. You and the respondent will be bound by the terms of any injunction issued at the final hearing.

**IF EITHER YOU OR THE RESPONDENT DO NOT APPEAR AT THE FINAL HEARING, YOU WILL BOTH BE BOUND BY THE TERMS OF ANY INJUNCTION ISSUED IN THIS MATTER.**

If the judge signs a temporary or final order for injunction, the clerk will provide you with the necessary copies, and both orders are valid and enforceable in all counties of the State of Florida.

### **What can I do if the judge denies my petition?**

If your petition is denied solely on the grounds that it appears to the court that no imminent danger exists, the court will set a full hearing, at the earliest possible time, on your petition, unless you request that no hearing be set. The respondent will be notified by personal service of your petition and the hearing. If your petition is denied, you may attempt to amend your petition under current rules of court.

IN THE CIRCUIT COURT OF THE TENTH JUDICIAL CIRCUIT,  
IN AND FOR POLK COUNTY, FLORIDA

\_\_\_\_\_  
Petitioner,

v.

Case No.: \_\_\_\_\_

\_\_\_\_\_  
Respondent,

PETITION FOR INJUNCTION FOR PROTECTION AGAINST  
EXPLOITATION OF A VULNERABLE ADULT

Before me, the undersigned authority, personally appeared Petitioner \_\_\_\_\_ who has been sworn and says that the following statements are true:

1. The vulnerable adult, \_\_\_\_\_, whose age is \_\_\_\_\_ and who resides at (address): \_\_\_\_\_

2. Section 825.101(14), Florida Statutes, provides that a vulnerable adult is a person whose ability to perform the normal activities of daily living or to provide for his or her own care or protection is impaired due to a mental, emotional, sensory, long-term physical, or developmental disability or dysfunction, or brain damage, or the infirmities of aging. Please describe the vulnerable adult's inability to perform the normal activities of daily living: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. The petitioner's relationship to the vulnerable adult is \_\_\_\_\_, and the petitioner has the right to bring the petition because: \_\_\_\_\_

4. The respondent resides at: \_\_\_\_\_  
\_\_\_\_\_

5. The respondent's last known place of employment is: \_\_\_\_\_  
\_\_\_\_\_

6. The physical description of the respondent is:

Race: \_\_\_\_\_

Eye Color: \_\_\_\_\_

Sex: \_\_\_\_\_

Hair Color: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Distinguishing marks or scars: \_\_\_\_\_

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

7. Aliases of the respondent are: \_\_\_\_\_

8. The respondent is associated with the vulnerable adult as follows: \_\_\_\_\_  
\_\_\_\_\_
9. The following describes (1) any other cause of action currently pending between the petitioner and the respondent, any guardianship proceeding under chapter 744 concerning the vulnerable adult, and any previous or pending attempts by the petitioner to obtain an injunction for protection against exploitation of the vulnerable adult in this or any other circuit; (2) related case numbers, if available; and (3) the results of any such attempts: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. The following describe the petitioner's knowledge of any reports made to (1) a government agency, including, but not limited to, the Department of Elderly Affairs, the Department of Children and Families, and the adult protective services program relating to the abuse, neglect, or exploitation of the vulnerable adult; (2) any investigations performed by a government agency relating to abuse, neglect, or exploitation of the vulnerable adult; and (3) the results of any such reports or investigations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. The petitioner knows or has reasonable cause to believe the vulnerable adult is either a victim of exploitation or is in imminent danger of becoming a victim of exploitation, because the respondent has caused the following incidents or made the following threats of exploitation:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. The following describes (1) the petitioner's knowledge of the vulnerable adult's dependence on the respondent for care; (2) alternative provisions for the vulnerable adult's care in the absence of the respondent, if necessary; (3) available resources the vulnerable adult has in order to access such alternative provisions; and (4) the vulnerable adult's willingness to use such alternative provisions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. The petitioner knows the vulnerable adult maintains assets, accounts, or lines of credit at the following financial institutions (provide name, address, and account number of each):

<u>Institution</u>	<u>Address</u>	<u>Account number</u>

14. The petitioner believes that the vulnerable adult's assets to be frozen are (check one):
- a.  Worth less than \$1500
  - b.  Worth between \$1500 and \$5000
  - c.  Worth more than \$5000
15. The petitioner genuinely fears imminent exploitation of the vulnerable adult by the respondent.
16. The petitioner seeks an injunction for the protection of the vulnerable adult, including (mark appropriate section or sections):
- a.  Prohibiting the respondent from having any direct or indirect contact with the vulnerable adult.
  - b.  Immediately restraining the respondent from committing any acts of exploitation against the vulnerable adult.
  - c.  Freezing the below assets, accounts, and/or lines of credit of the vulnerable adult, even if titled jointly with the respondent, or in the respondent's name only, in the court's discretion:

<u>Institution</u>	<u>Address</u>	<u>Account Number</u>

- d.  Providing any terms the court deems necessary for the protection of the vulnerable adult or his or assets, including any injunctions or directives to law enforcement agencies, including:

\_\_\_\_\_  
\_\_\_\_\_

17. If the court enters an injunction freezing assets and credit lines:

- a. The petitioner believes that the critical expenses of the vulnerable adult will be paid for or provided by the following persons or entities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**OR**

- b. The petitioner requests that the following expenses be paid notwithstanding the freezing of assets, accounts, or lines of credit from the following institution(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**I ACKNOWLEDGE THAT PURSUANT TO SECTION 415.1034, FLORIDA STATUTES, ANY PERSON WHO KNOWS, OR HAS REASONABLE CAUSE TO SUSPECT, THAT A VULNERABLE ADULT HAS BEEN OR IS BEING ABUSED, NEGLECTED, OR EXPLOITED HAS A DUTY TO IMMEDIATELY REPORT SUCH KNOWLEDGE OR SUSPICION TO THE CENTRAL ABUSE HOTLINE. I HAVE REPORTED THE ALLEGATIONS IN THIS PETITION TO THE CENTRAL ABUSE HOTLINE.**

**I HAVE READ EACH STATEMENT MADE IN THE PETITION AND EACH SUCH STATEMENT IS TRUE AND CORRECT. I UNDERSTAND THAT THE STATEMENTS MADE IN THIS PETITION ARE BEING MADE UNDER PENALTY OF PERJURY PUNISHABLE AS PROVIDED IN SECTION 837.02. FLORIDA STATUTES.**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Designated E-mail address(es): \_\_\_\_\_

\_\_\_\_\_

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me by means of  physical presence or  online notarization, on \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

Printed Name: \_\_\_\_\_

\_\_\_\_\_  
Personally known

\_\_\_\_\_  
Produced identification: \_\_\_\_\_

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

\_\_\_\_\_  
Petitioner,

v.

Case No.: \_\_\_\_\_

\_\_\_\_\_  
Respondent,

\_\_\_\_\_ /

**CONSENT FOR PETITIONER TO FILE ON BEHALF OF VULNERABLE ADULT**

I consent to a Petition for Injunction being filed against \_\_\_\_\_.  
(Respondent)

I wish to designate \_\_\_\_\_ to petition on my behalf  
for an injunction for protection against exploitation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

Address: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

\_\_\_\_\_  
Petitioner,

v.

Case No.: \_\_\_\_\_

\_\_\_\_\_  
Respondent,

\_\_\_\_\_ /

**REQUEST TO DISMISS PETITION FOR INJUNCTION  
IF TEMPORARY INJUNCTION IS DENIED**

1. I understand that I am entitled to a full, final hearing before a Judge on my Petition for Protection against Exploitation within 15 days of its filing. This hearing will determine if there will be a final/permanent injunction. The Respondent will be served with a copy of my Petition by the \_\_\_\_\_ Sheriff's Office, Respondent has the right to appear at the final hearing.
2. I understand that the Judge will decide today if there will be a temporary injunction (no contact order) in place during that 15-day period.
3. If the temporary injunction is denied, I understand that the Respondent will still be served with a copy of my Petition even though there is no temporary injunction or "no contact" order in place.

With this knowledge, I do NOT believe it will be in my best interest to have a final hearing if the temporary injunction (no contact order) is denied. I GIVE UP my right to the final hearing and request that the case be dismissed at that time. The case will END and my Petition will NOT be served upon the Respondent. I understand that a victim advocate from \_\_\_\_\_

\_\_\_\_\_ may call me to discuss my case, my safety, and my options.

\_\_\_\_\_  
Signature

I HEREBY CERTIFY that a copy of the foregoing was furnished by \_\_\_\_ (email) \_\_\_\_ (delivery) \_\_\_\_ (mail) \_\_\_\_ (fax) on (All parties and Affected Non-Parties. Note: If the name or address of a Party or Affected Non-Party is confidential, DO NOT include such information in this Certificate of Service. Instead, serve the State Attorney or request Court Service. See Rule 2.420(k))

on, \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Florida Bar No. (if applicable) \_\_\_\_\_

E-mail address \_\_\_\_\_

**INSTRUCTIONS FOR MOTION TO MODIFY  
AN INJUNCTION FOR PROTECTION AGAINST  
EXPLOITATION OF A VULNERABLE ADULT**

**When should this form be used?**

This form may be used to modify an injunction for protection against exploitation of a vulnerable adult. No specific allegations are required for modification of the injunction.

**Who may file this form?**

This form may be filed by:

- The petitioner who obtained an injunction for protection against exploitation of a vulnerable adult;
- The respondent against whom an injunction for protection against exploitation of a vulnerable adult was entered; or
- The vulnerable adult about whom an injunction for protection against exploitation of a vulnerable adult was entered.

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

\_\_\_\_\_  
Petitioner

v.

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

\_\_\_\_\_  
Respondent

\_\_\_\_\_ /

**MOTION TO MODIFY INJUNCTION AGAINST  
EXPLOITATION OF A VULNERABLE ADULT**

I, \_\_\_\_\_, being sworn, certify that the following statements are true:

1. I am the \_\_\_ Petitioner / \_\_\_ Respondent / \_\_\_ Vulnerable Adult in this case.

2. I currently live at the following address: \_\_\_\_\_  
\_\_\_\_\_

And my telephone number is: ( \_\_\_\_\_ ) \_\_\_\_\_

3. This is a request to modify the Injunction Against Exploitation of a Vulnerable Adult entered on \_\_\_\_\_, 20\_\_.

5. I am asking the court to modify the injunction because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. I am asking the court to modify the injunction in the following way(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. I understand that the court may hold a hearing on this motion and, if so, that I must appear at the hearing.

For the foregoing reasons, I ask the court to modify the Injunction Against Exploitation of a Vulnerable Adult entered on \_\_\_\_\_, 20\_\_.

**I HAVE READ EACH STATEMENT MADE IN THIS MOTION AND EACH SUCH STATEMENT IS TRUE AND CORRECT. I UNDERSTAND THAT THE STATEMENTS MADE IN THIS MOTION ARE BEING MADE UNDER PENALTY OF PERJURY PUNISHABLE AS PROVIDED IN SECTION 837.02, FLORIDA STATUTES.**

**I HEREBY CERTIFY** that a true copy of the foregoing Motion was delivered to

\_\_\_\_\_ by U.S. mail or eservice on \_\_\_\_\_.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Designated E-mail Address(es): \_\_\_\_\_  
\_\_\_\_\_

**INSTRUCTIONS FOR MOTION TO DISSOLVE  
AN INJUNCTION FOR PROTECTION AGAINST  
EXPLOITATION OF A VULNERABLE ADULT**

**When should this form be used?**

This form may be used to dissolve an injunction for protection against exploitation of a vulnerable adult. No specific allegations are required for dissolution of the injunction.

**Who may file this form?**

This form may be filed by:

- The petitioner who obtained an injunction for protection against exploitation of a vulnerable adult;
- The respondent against whom an injunction for protection against exploitation of a vulnerable adult was entered; or
- The vulnerable adult about whom an injunction for protection against exploitation of a vulnerable adult was entered.

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

\_\_\_\_\_  
Petitioner

v.

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

\_\_\_\_\_  
Respondent

\_\_\_\_\_ /

**MOTION TO DISSOLVE INJUNCTION AGAINST  
EXPLOITATION OF A VULNERABLE ADULT**

I, \_\_\_\_\_, being sworn, certify that the following statements are true:

1. I am the \_\_\_ Petitioner / \_\_\_ Respondent / \_\_\_ Vulnerable Adult in this case.

2. I currently live at the following address: \_\_\_\_\_  
\_\_\_\_\_

And my telephone number is: (\_\_\_\_\_) \_\_\_\_\_

3. This is a request to dissolve the Injunction Against Exploitation of a Vulnerable Adult entered on \_\_\_\_\_, 20\_\_.

5. I am asking the court to dissolve the injunction because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. I understand that the court may hold a hearing on this motion and, if so, that I must appear at the hearing.

For the foregoing reasons, I ask the court to dissolve the Injunction Against Exploitation of a Vulnerable Adult entered on \_\_\_\_\_, 20\_\_.

**I HAVE READ EACH STATEMENT MADE IN THIS MOTION AND EACH SUCH STATEMENT IS TRUE AND CORRECT. I UNDERSTAND THAT THE STATEMENTS MADE IN THIS MOTION ARE BEING MADE UNDER PENALTY OF PERJURY PUNISHABLE AS PROVIDED IN SECTION 837.02, FLORIDA STATUTES.**

**I HEREBY CERTIFY** that a true copy of the foregoing Motion was delivered to

\_\_\_\_\_ by U.S. mail or eservice on \_\_\_\_\_.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Designated E-mail Address(es): \_\_\_\_\_  
\_\_\_\_\_

**INSTRUCTIONS FOR FILING AN AFFIDAVIT OF VIOLATION  
OF INJUNCTION FOR PROTECTION AGAINST  
EXPLOITATION OF A VULNERABLE ADULT**

**When should this form be used?**

This form may be used to notify the court, state attorney, and law enforcement of a violation of an injunction for protection against exploitation of a vulnerable adult. A respondent may violate such an injunction by:

- Refusing to vacate the dwelling respondent shares with the vulnerable adult;
- Going to or being within 500 feet of the vulnerable adult's residence;
- Exploiting or unduly influencing the vulnerable adult;
- Committing any other violation of the injunction through an intentional unlawful threat, word, or act to do violence to the vulnerable adult;
- Telephoning, contacting, or otherwise communicating with the vulnerable adult directly or indirectly where the injunction does not specifically allow indirect contact through a third party;
- Knowingly and intentionally coming within 100 feet of the vulnerable adult's motor vehicle, regardless of whether that vehicle is occupied; or
- Defacing or destroying the vulnerable adult's personal property.

**Who may file this form?**

This form may be filed by the petitioner who obtained an injunction for protection against exploitation of a vulnerable adult.

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

\_\_\_\_\_  
Petitioner

v.

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

\_\_\_\_\_  
Respondent  
\_\_\_\_\_ /

**AFFIDAVIT OF VIOLATION OF INJUNCTION  
AGAINST EXPLOITATION OF A VULNERABLE ADULT**

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, swear and affirm that the following facts are true and correct:

Respondent has violated the Injunction Against Exploitation of a Vulnerable Adult entered on \_\_\_\_\_, 20\_\_, in the above-styled action, by (check all that apply):

- Refusing to vacate the dwelling respondent shares with the vulnerable adult;
- Going to or being within 500 feet of the vulnerable adult's residence;
- Exploiting or unduly influencing the vulnerable adult;
- Committing any other violation of the injunction through an intentional unlawful threat, word, or act to do violence to the vulnerable adult;
- Telephoning, contacting, or otherwise communicating with the vulnerable adult directly or indirectly where the injunction does not specifically allow indirect contact through a third party;
- Knowingly and intentionally coming within 100 feet of the vulnerable adult's motor vehicle, regardless of whether that vehicle is occupied; or
- Defacing or destroying the vulnerable adult's personal property.

The following lines may be used to explain any alleged violation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AFFIANT HEREBY CERTIFIES UNDER PENALTY OF PERJURY THAT THE STATEMENTS AND FACTS IN THIS AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Designated E-mail Address(es): \_\_\_\_\_  
\_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me by means of  physical presence or  online notarization,  
on \_\_\_\_\_, 20\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

Printed Name: \_\_\_\_\_

\_\_\_ Personally known

\_\_\_ Produced identification: \_\_\_\_\_