**FL401**

Apply for a non-molestation or occupation order. Family Law Act (Part 4).

|  |  |
| --- | --- |
| The family court sitting at: |  |
| Case number: |  |
| Date issued (using format DD MMM YYYY): |  |

**Type of application**

|  |  |
| --- | --- |
| Order applied for: | *Non molestation order OR occupation order* |
| Is this linked to a Child Arrangements application? | Yes/No |
| Child Arrangements case number: |  |

**Without notice order**

|  |  |
| --- | --- |
| Do you want to apply for the order without giving notice to the respondent? | *Yes or No* |
| Why do you want to apply without giving notice to the respondent? | *Three options - A, B, C* |
| Why do you think one or more of the reasons above may happen? (optional): | *Free text input* |
| Is the respondent subject to any bail conditions? | Yes/ No |
| When do the bail conditions end? | *Date provided in format DD/MM/YYYY* |
| Is there anything else about the applicant’s situation that you would like the court to know about, or consider? | *Free Text* |

**Applicant’s details**

|  |  |
| --- | --- |
| First name(s): |  |
| Last name: |  |
| Previous name (if any): |  |
| Applicant’s date of birth: | *Date of birth in format DD/MM/YYYY* |
| Applicant’s gender: |  |
| Address: | *This information is to be kept confidential* |
| Do you need to keep the address confidential? | *Yes/No* |
| Can you provide an email address? |  |
| Email address: | *Email address* |
| Do you need to keep the email address confidential? | *Yes/No* |
| Contact number: | *This information is to be kept confidential* |
| Do you need to keep the contact number confidential? | *Yes/No* |

**Legal representative’s details**

|  |  |
| --- | --- |
| Legal representative’s first name: |  |
| Legal representative’s last name: |  |
| Email address: |  |
| Legal representative’s contact number: |  |
| Legal representative’s reference (optional): |  |
| Organisation name: |  |
| Organisation address: |  |
| DX number (optional): |  |

**Respondent’s details**

|  |  |
| --- | --- |
| First name: |  |
| Last name: |  |
| Previous name (if any): |  |
| Date of birth (if known): | dd/mm/yyyy |
| Does the respondent live with the applicant? | Yes/No |
| Is the current address known? | Yes/No |
| Respondent’s address (if known): |  |
| Can you provide an email address? | Yes/No |
| Email address (if known): |  |
| Can you provide a contact number? | Yes/No |
| Contact number (if known): |  |

**Relationship to respondent**

|  |  |
| --- | --- |
| Applicant’s relationship to respondent: |  |
| When did the relationship start? | *dd/mm/yyyy* |
| When did the relationship end (if applicable?) | *dd/mm/yyyy* |
| If the applicant is, or was, married or in a civil partnership with the respondent, what date was the wedding or the civil ceremony? (optional) | dd/mm/yyyy |
| What was the respondent’s relationship with the applicant (if not already answered in this section?) |  |

**Applicant’s family**

|  |  |
| --- | --- |
| Does the applicant have any children (or parental responsibility over any children) who need to be protected as part of this application? |  |

**Child to be protected 1**

|  |  |
| --- | --- |
| Child’s full name: |  |
| Child’s date of birth: | *Date (DD MM YYYY)* |
| Applicant’s relationship to the child: |  |
| Do the applicant and the respondent have shared parental responsibility? | *Yes/No* |
| Respondent’s relationship to the child: |  |

**Respondent’s behaviour**

|  |  |
| --- | --- |
| What does the applicant want to stop the respondent from doing? |  |
| What does the applicant want the respondent to stop doing to their child or children (if applicable)? |  |
| Is there anything else that the applicant wants the respondent to stop doing, that is not mentioned in the questions above? | *Free text* |

**The home**

|  |  |
| --- | --- |
| Address that the occupation order should apply to: |  |
| Who currently lives at the above address (please select all that apply)? |  |
| Has the applicant or respondent ever lived at the above address, but don’t live there currently? | *Yes/No* |
| Did the applicant or respondent ever intend to live in the address? | *Yes/No* |
| Do any children live at the address that the applicant is responsible for? | *This information is to be kept confidential* |

**Child 1**

|  |  |
| --- | --- |
| Do you need to keep this information confidential? |  |
| Child’s full name: |  |
| Child’s age: |  |
| Is the respondent also responsible for the child? | *Yes or No* |

**The home (continued)**

|  |  |
| --- | --- |
| Is the property adapted in any way for the applicant, child, children or anyone else living there? | *Yes/No* |
| Details of special adaptations: |  |
| Is there a mortgage on the property? | *Yes/No* |
| Who is named on the mortgage? |  |
| Mortgage number (if known): |  |
| Mortgage lender’s name: |  |
| Mortgage lender’s address: |  |
| Is the property rented? | *Yes/No* |
| Who is named in the rental agreement? |  |
| What is the name of the landlord of the rental property? |  |
| Landlord’s address: |  |
| Does the applicant have any home rights? | *Yes/No* |
| What exactly does the applicant want to happen with their living situation? |  |
| Is there anything else the applicant wants to happen with their family home? | *Free text* |
| Any further information the applicant would like to be considered by the court: |  |

**Other proceedings**

|  |  |
| --- | --- |
| Are there ongoing family court proceedings involving the applicant or respondent? |  |

**Proceeding details**

|  |  |
| --- | --- |
| Name of court: |  |
| Case number (optional): |  |
| Type of case: |  |
| Any other details: |  |

**Attending the hearing**

**Language requirements**

|  |  |
| --- | --- |
| Will the applicant, or anyone else attending court, need to speak Welsh or read and write in Welsh during the proceedings? | *Yes/No* |

**Welsh needs**

|  |  |
| --- | --- |
| Provide the names of people involved in the case who need to speak Welsh and write in Welsh. |  |
| Welsh language requirements: |  |

**Interpreter needs**

|  |  |
| --- | --- |
| Do you know if an interpreter will be needed in the court, to explain information in a certain language? |  |
| Who will require the interpreter? |  |
| Describe their relationship to the case: |  |
| Enter details of language or dialect required: |  |
| Any other assistance required (e.g. sign language) (optional) |  |

**Accessibility**

|  |  |
| --- | --- |
| Does the applicant, or anyone else attending court have a disability? | *Yes/No* |
| Describe the adjustments the court needs to make: |  |

**Special arrangements**

|  |  |
| --- | --- |
| Will the court need to make special arrangements for the applicant, or anyone else involved in the case? | *Yes/No* |
| Give details of the special arrangements that are required: |  |
| Do you know if an intermediary will be required? |  |
| Set out the reasons that an intermediary will be required: |  |

**Welsh language requirements**

|  |  |
| --- | --- |
| Does any person in this case need orders or documents in Welsh? |  |
| Which language are you using to complete the application? |  |
| Does this application need to be translated into English? |  |
| Does this application need to be translated into Welsh? |  |

**Statement of truth**

I understand that proceedings for contempt of court may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

The applicant believes that the facts stated in this form and any continuation sheets are true. I am authorised by the applicant to sign this statement.

**Date**

Day Month Year

**Processing details (for court use only)**

|  |  |
| --- | --- |
| Court: |  |
| Date: |  |