



I certify that all of the following statements are true:

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, checks or bank or credit cards in my name, employment records, personal identification documents, copies of electronic records containing legal or financial documents, assistance animals or service animals, as defined by Section 121.002, Human Resources Code, used by me or my dependents, wireless communication devices, as defined by Section 545.425(a), Transportation Code, belonging to me or my dependents, tools, equipment, books, or apparatus used by me in my trade or profession.**

- 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.
- 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.
- I am not the subject of an active protective order under Family Code Title 4, a magistrate's order for emergency protection under Code of Criminal Procedure Article 17.292, or any court order prohibiting my entry into the Residence; or otherwise prohibited by law from entering into the Residence.
- I and the current Occupant are not parties to a pending divorce or annulment case under Title 1, Family Code.
- My right to possession of the items described in this application is not subject to a decree of divorce or annulment to which I and the current Occupant are parties.

I request that this Writ of Retrieval be issued *ex parte* (*without notice to the current occupant of the Residence*), because the following facts are true:

- The current Occupant of this Residence poses a clear and present danger of family violence to me; and
- My dependent or I will suffer immediate and irreparable personal harm if the application is denied.

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Applicant's Signature

Date

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Address & Phone Number