

IN THE SUPREME COURT OF THE STATE OF ARIZONA  
ADMINISTRATIVE OFFICE OF THE COURTS

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In the Matter of: )  
)  
PROTECTING PEACE OFFICERS' )  
IDENTIFYING INFORMATION IN ) Administrative Directive  
SUPERIOR COURT RECORDS ) No. 2014 - 26  
PROCEDURES AND FORMS )  
)  
\_\_\_\_\_ )

On December 23, 2014, the Supreme Court issued Administrative Order No. 2014-134 adopting Arizona Code of Judicial Administration § 3-405: Protecting Peace Officers' Identifying Information in Superior Court Records.

The code authorizes the Administrative Director to approve forms and procedures for protecting peace officer identifying information in superior court records.

Therefore, pursuant to Administrative Order No. 2014-134 and in order to promote the use of uniform and efficient legal forms at all levels of the court system and to enhance the public's access to the courts through the availability of useable and understandable legal forms,

IT IS DIRECTED that effective January 1, 2015, the forms in Appendix A are adopted for mandatory use by all Arizona courts for matters concerning protection of peace officers' identifying information pursuant to A.R.S. § 12-290.

Dated this 30<sup>th</sup> day of December 2014.

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David K. Byers  
Administrative Director

# APPENDIX

## A

## **INSTRUCTIONS**

### **Petition and Affidavit in Support of Application to Restrict Public Access to Personal Information in Superior Court - For use by peace officers**

#### **USE THIS FORM IF:**

- You are a peace officer eligible to apply for the relief provided by A.R.S. § 12-290, and
- You can show facts sufficient to establish that either you, your family, or other person living at your primary residence are in danger of physical harm and that restricting public access to your personal information specified in this statute will reduce this danger.

**TO COMPLETE THIS FORM YOU WILL NEED:** The case number, the document caption and the date the document was filed containing your residential address, phone number or contact information you want restricted. This information is needed for every document you want restricted. A separate affidavit is required for each case you want restricted.

#### **HOW TO COMPLETE THE AFFIDAVIT FORM:**

TYPE OR PRINT NEATLY USING **BLACK INK**. THIS IS AN OFFICIAL MANDATORY FORM, DO NOT ALTER THE FORMAT, PAGINATION, OR LINE NUMBERING, OR SUBMIT THIS FORM AS A DOUBLE-SIDED DOCUMENT. You may add extra pages if needed to provide complete information under any item.

All applicants must complete items 1 - 5, item 6 (if applicable), and 7.

Match each numbered item in the instructions with the same numbered item on the affidavit.

1. Print your full name as it appears in the court case or court document.
3. Provide the name of the law enforcement or other public agency that employs you.
4. Provide your job title and a description of your duties.
5. Explain why you believe your life or safety or that of someone who lives with you is in danger of physical harm.
6. Explain why immediate protection is needed. A.R.S. § 12-290 provides that in the absence of a request for immediate action supported by facts justifying an earlier consideration, the presiding judge may rule on the application at the end of each quarter.
7. Provide the document caption and the date the document was filed for every document containing the residential address, phone number or contact information you want restricted.

#### **WHEN YOU HAVE COMPLETED THE AFFIDAVIT:**

Date and sign the affidavit in the presence of a notary public. The affidavit must be filed with the presiding superior court judge of the county that contains the personal identifying information. Give your affidavit and any attachments to the commanding officer or supervisor responsible for filing it on your behalf in the county where the case was originally filed.

**PLEASE BE ADVISED** this process is designed to protect your primary residential address and phone number in a limited class of superior court records **ONLY**. If your application is granted, your home address and phone number may still be publicly-accessible in other public records and commercially-available databases.

**SUPERIOR COURT OF ARIZONA COUNTY OF \_\_\_\_\_**

_____	)	Case No.
Petitioner	)	_____
and	)	
_____	)	<b>PETITION AND AFFIDAVIT TO</b>
Respondent	)	<b>RESTRICT PUBLIC ACCESS TO</b>
_____	)	<b>PERSONAL IDENTIFYING</b>
	)	<b>INFORMATION PURSUANT TO</b>
	)	<b>A.R.S. § 12-290</b>

**PLEASE READ THE INSTRUCTIONS BEFORE COMPLETING THIS FORM AND  
PRINT ALL REQUIRED INFORMATION IN BLACK INK**

**1.** I, \_\_\_\_\_, make the following statements under oath:

I submit this affidavit pursuant to A.R.S. § 12-290, for Case Number \_\_\_\_\_.

I request that the court order the general public be prohibited from accessing superior court records maintained by the Clerk of the Superior Court that contain my personal identifying information. Personal identifying information includes my residential address, telephone number and contact information appearing in instruments, writings and information maintained by the Clerk of Superior Court.

**2.** I am employed as a Peace Officer as provided in A.R.S. § 1-215.

**3.** I am employed by \_\_\_\_\_

**4.** My current job title and duties include: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5.** I believe that my life or safety, or that of my family or other persons living at my residence, is in danger of physical harm for the following reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**6.** *(Optional – complete this item ONLY if you need immediate record protection)* I request immediate action for the following reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. The case number, document caption, and date of filing of each instrument for which I request public access restriction pursuant to A.R.S. § 12-290 are as follows:

Case Number: \_\_\_\_\_

Document caption \_\_\_\_\_ Date of filing \_\_\_\_\_

I understand that if the court grants my petition I must file all subsequent documents with the clerk without a residential address, phone number or contact information. I understand I am required to file with the clerk a form containing my current residential address, telephone number and contact information and must provide the clerk with updated information if any change in this information occurs during the pendency of the proceeding and thereafter as required by the court.

On the basis of the facts set forth herein, I respectfully request the court to order the sealing of the information or records identified by me in item 7 above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Affiant's signature

State of Arizona )  
County of ) ss.  
 )

Subscribed and sworn to (or affirmed) before me on \_\_\_\_\_

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

**SUPERIOR COURT OF ARIZONA COUNTY OF \_\_\_\_\_**

_____	)	Case No.
Petitioner	)	_____
and	)	ORDER RESTRICTING PUBLIC
_____	)	ACCESS TO PERSONAL
Respondent	)	IDENTIFYING INFORMATION
_____	)	PURSUANT TO A.R.S. § 12-290
	)	

The court, having reviewed the petition and affidavit in this cause, finds:

1. The applicant is an eligible person as defined in A.R.S. § 1-215 and A.R.S. § 12-290;
2. The life or safety of the officer or another person is in danger and restricting access to records that contain the officer's personal identifying information will serve to reduce the danger.

**IT IS ORDERED:**

\_\_\_\_\_The Clerk of the Superior Court shall seal the documents specified in the petition and affidavit filed with this Order. The Clerk of the Superior Court shall restrict public access to the applicant's address, phone number, or contact information in the case management system. The applicant shall not include the applicant's residential address, phone number or contact information on documents filed with the court.

\_\_\_\_\_The Clerk of the Superior Court shall seal the entire case file and the applicant shall file all subsequent documents with the Clerk under seal.

**IT IS FURTHER ORDERED** directing the Clerk of the Superior Court to file the petition and affidavit and this order under seal, not to be opened without further order from this court. Except that the parties and their attorneys shall be provided access to view and obtain copies of the records sealed by this order upon providing a copy of this order and proof of their identity to the Clerk.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Presiding Judge or Designee

\_\_\_\_\_  
Printed Name of Judicial Officer

**SUPERIOR COURT OF ARIZONA COUNTY OF \_\_\_\_\_**

_____	)	Case No.
Petitioner	)	_____
and	)	<b>ORDER DENYING REQUEST TO RESTRICT PUBLIC ACCESS TO PERSONAL IDENTIFYING INFORMATION PURSUANT TO A.R.S. § 12-290</b>
_____	)	
Respondent	)	
_____	)	

The court, having reviewed the petition and affidavit in this cause, finds that the applicant failed to demonstrate eligibility to apply for the relief requested or that the life or safety of the officer or another person is in danger and that restricting access to records that contain the officer's personal identifying information would serve to reduce the danger as required by A.R.S. § 1-215 and A.R.S. § 12-290.

IT IS ORDERED denying the restriction requested in the petition and affidavit.

IT IS FURTHER ORDERED directing the Clerk of the Superior Court to file the petition and affidavit under seal, not to be opened without further order from this court.

IT IS FURTHER ORDERED directing the Clerk of the Superior Court to file this order as a public record.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Presiding Judge or Designee

\_\_\_\_\_  
Printed Name of Judicial Officer

SUPERIOR COURT OF ARIZONA COUNTY OF \_\_\_\_\_

\_\_\_\_\_  
Petitioner  
and  
\_\_\_\_\_  
Respondent  
\_\_\_\_\_

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

REQUEST FOR HEARING ON ORDER  
DENYING RESTRICTING PUBLIC  
ACCESS TO PERSONAL  
IDENTIFYING INFORMATION  
PURSUANT TO A.R.S. § 12-290

I request a hearing on the denial of my request to restrict public access to personal identifying information.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Applicant's Printed Name

The Court completes the following section.

IT IS ORDERED scheduling a hearing on the above matter.

Hearing Date: \_\_\_\_\_ Hearing Time: \_\_\_\_\_

Hearing Location: \_\_\_\_\_

Judicial Officer: \_\_\_\_\_

**DATED:** \_\_\_\_\_

\_\_\_\_\_  
**Judicial Officer**

Mailed/handed to applicant on \_\_\_\_\_, \_\_\_\_\_ by \_\_\_\_\_