

**SUPERIOR COURT OF ARIZONA  
MOHAVE COUNTY**

\_\_\_\_\_  
Petitioner

and

\_\_\_\_\_  
Respondent

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

**PETITION AND AFFIDAVIT TO  
RESTRICT PUBLIC ACCESS TO  
PERSONAL IDENTIFYING  
INFORMATION PURSUANT TO  
A.R.S. § 12-290**

**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

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

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

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Document caption Date of filing

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Document caption Date of filing

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

I understand that if the court grants my petition I will 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 and records identified by me in item 7 above.

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

**OATH OR AFFIRMATION**

STATE OF ARIZONA )  
MOHAVE COUNTY ) ss.

The contents of this document are true and correct under penalty of perjury.

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

\_\_\_\_\_  
Date

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_, day of \_\_\_\_\_, 20\_\_\_\_\_

by \_\_\_\_\_.  
(Print Name)

My Commission Expires: \_\_\_\_\_

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