

Superior Court of New Jersey

Division

County

**DOMESTIC VIOLENCE WARRANT
FOR THE SEARCH & SEIZURE
OF WEAPONS**

TO: ANY LAW ENFORCEMENT OFFICER HAVING JURISDICTION

1. The Court, having reviewed the affidavit or testimony of _____ under oath, against _____, finds good cause to believe that the life, health, and well-being of _____ have been and are endangered by defendant's acts of violence and finds good cause to believe that the defendant may not be qualified to possess firearms pursuant to *N.J.S.A. 2C:58-3c*. The Court finds probable cause to believe that the below listed weapons in defendant's possession may present a risk to plaintiff.

2. **YOU ARE HEREBY COMMANDED** to search the premises described as _____

for the above described weapons and to serve a copy of this warrant upon the person at that address.

- You are further commanded to seize from defendant any issued permit to carry a firearm, firearms purchaser identification card and any outstanding applications to purchase handguns.

3. **YOU ARE HEREBY ORDERED**, in the event you seize any of the above described weapons, to give a receipt for the property so seized to the person from whom they were taken or in whose possession they were found, or in the absence of such person, to leave a copy of this warrant together with such receipt in or upon the said structure from which the property was taken.

4. **YOU ARE AUTHORIZED** to execute this warrant within 10 days from the issuance hereof:

- Between the hours of ___ m. and ___ m., or
 Anytime

After the execution of this warrant, you are ordered to forthwith make prompt return to this Court with a written inventory of the property seized hereunder.

5. Given and issued under my hand at _____ at _____ o'clock
_____ m. this day of _____, 20 ____.

(Signature)
Judge of the Superior Court of New Jersey

Superior Court of New Jersey

Division
County

**AFFIDAVIT IN SUPPORT OF A DOMESTIC
VIOLENCE WARRANT FOR THE SEARCH &
SEIZURE OF WEAPONS**

State of New Jersey

County of _____ : SS

I, _____, of _____, being of full age
(Name of Officer) (Department)
and having been duly sworn upon my oath according to law, depose and say:

1. On _____ at _____ m., I was dispatched to the following premises:

in response to a domestic violence incident.

2. I was told by _____, the victim of the domestic violence
incident, that he or she believes that his or her life, health or well-being is in imminent danger by the
domestic violence assailant, _____, by one of the weapons listed in
paragraph 3. The victim said:

3. The victim has described the weapons as follows: _____

4. The victim of domestic violence has informed this officer that the domestic violence assailant has the
weapons listed in paragraph 3 at

(Describe premises in detail and identify owner of premise if not person listed in Paragraph 1)

5. The domestic violence assailant or the possessor of the weapons has refused to surrender the above stated weapons or to allow a law enforcement officer to enter the premises, described in paragraph 4 to search for the named weapons.
6. Based on the above, this officer has probable cause to believe that the presence of the weapons described in paragraph 3 exposes the victim to a risk of serious bodily injury and I cannot obtain possession of the weapons from the possessor of the named weapons.
7. I want to search the premises described in paragraph 4 for the weapons described in paragraph 3 and to seize any of the above named weapons found at that location for safekeeping purposes. I also want to seize from the defendant any issued permit to carry a firearm, firearms purchaser identification card and any outstanding applications to purchase handguns.

8. _____
(If requesting a No Knock Warrant or Entry at Special Hours, explain reason here or on attached sheet or enter any additional information here)

(Signature of Affiant)

Sworn and subscribed before me this _____ day of _____
20____.

Judge of the Superior Court of New Jersey

Search Warrant Application approved by _____ (DAG) (AP)

STATE OF NEW JERSEY
INVESTIGATION REPORT

Bureau/Unit:	Division Case Number:	Case Title:
---------------------	------------------------------	--------------------

Narrative:

Investigator Name, Badge #	Page 1	Supervisor Approval	Review Date
----------------------------	--------	---------------------	-------------

Date:

Signature of Investigator