

**INSTRUCTIONS FOR  
PETITION FOR INJUNCTION FOR PROTECTION  
AGAINST EXPLOITATION OF A VULNERABLE ADULT**

**When should this form be used?**

This form should be used to obtain an order that will protect a vulnerable adult from exploitation.

A vulnerable adult is a person 18 years of age or older whose ability to perform the normal activities of daily living or to provide for his or her own care or protection is impaired due to a mental, emotional, sensory, long-term physical, or developmental disability or dysfunction, or brain damage, or the infirmities of aging.

Exploitation is knowingly obtaining or using, or endeavoring to obtain or use, a vulnerable adult's funds, assets, or property with the intent to temporarily or permanently deprive him or her of the use, benefit, or possession of the funds, assets, or property, or to benefit someone other than the vulnerable adult, by a person who stands in a position of trust and confidence with the vulnerable adult or has a business relationship with him or her.

**Who may file this form?**

A petition may be filed by a vulnerable adult in imminent danger of being exploited, the guardian of any such vulnerable adult, a person or organization acting on behalf of a vulnerable adult with the consent of the vulnerable adult or his or her guardian, or a person who simultaneously files a petition for determination of incapacity and appointment of an emergency temporary guardian with respect to the vulnerable adult.

**Where should this form be filed?**

A petition must be filed in the circuit where the vulnerable adult resides. If a guardianship proceeding concerning the vulnerable adult is pending at the time of the filing, the petition must be filed in that proceeding.

**What must be shown?**

The sworn petition must allege the existence of exploitation, or the imminent exploitation, of the vulnerable adult and must include the specific facts and circumstances for which relief is sought.

IN THE CIRCUIT COURT OF THE THIRD JUDICIAL CIRCUIT  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

\_\_\_\_\_,  
Petitioner,

v.

Case No.: \_\_\_\_\_  
Division: \_\_\_\_\_

\_\_\_\_\_,  
Respondent.

\_\_\_\_\_ /

**PETITION FOR INJUNCTION FOR PROTECTION  
AGAINST EXPLOITATION OF A VULNERABLE ADULT**

Before me, the undersigned authority, personally appeared Petitioner, \_\_\_\_\_,  
who has been sworn and says that the following statements are true:

1. This cause of action is brought by the following person(s):
  - The vulnerable adult in immediate danger of being exploited;
  - The guardian of a vulnerable adult in imminent danger of being exploited;
  - A person or organization acting on behalf of the vulnerable adult with the consent of the vulnerable adult or his or her guardian;
  - A person who has simultaneously filed a petition for determination of incapacity and appointment of an emergency temporary guardian with respect to the vulnerable adult;
  - Other: (please explain) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Description of vulnerable adult:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth: \_\_\_\_\_

2. Description of the Respondent:

Address: \_\_\_\_\_  
\_\_\_\_\_

Respondent's last known place of employment is:

\_\_\_\_\_  
\_\_\_\_\_  
(name of business and address)

Physical description of the Respondent:

Race: \_\_\_\_\_

Sex: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Eye color: \_\_\_\_\_

Hair color: \_\_\_\_\_

Distinguishing marks or scars: \_\_\_\_\_

Aliases of the respondent: \_\_\_\_\_

3. The Respondent is associated with the vulnerable adult as follows: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

4. The following describes any other cause of action currently pending between the petitioner and the respondent, any proceeding under chapter 744 concerning the vulnerable adult, and any previous or pending attempts by the petitioner to obtain an injunction for protection against exploitation of the vulnerable adult in this or any other circuit; related case numbers, if available; and the results of any such attempts: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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5. The following describes the petitioner's knowledge of any reports made to a government agency, including, but not limited to, the Department of Elderly Affairs, the Department of Children and Families, and the adult protective services program relating to the abuse, neglect, or exploitation of the vulnerable adult; any investigations performed by a government agency relating to abuse, neglect, or exploitation of the vulnerable adult; and the results of any such reports or investigations: \_\_\_\_\_

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6. The petitioner knows the vulnerable adult is either a victim of exploitation or the petitioner has reasonable cause to believe the vulnerable adult is, or is in imminent danger of becoming, a victim of exploitation because the respondent has (describe in the spaces below the incidents or threats of exploitation): \_\_\_\_\_

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7. The following describes the petitioner's knowledge of the vulnerable adult's dependence on the respondent for care; alternative provisions for the vulnerable adult's care in the absence of the respondent, if necessary; available resources the vulnerable adult must access such alternative provisions; and the vulnerable adult's willingness to use such alternative provisions: \_\_\_\_\_

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8. The petitioner knows the vulnerable adult maintains assets, account, or lines of credit at the following financial institution(s):

Name of Financial Institution	Address	Account Number

9. The petitioner believes that the vulnerable adult's assets to be frozen are (mark one):

- Worth less than \$1500;
- Worth between \$1500 and \$5000; or
- Worth more than \$5000.

10. The petitioner genuinely fears imminent exploitation of the vulnerable adult by the respondent.

11. The petitioner seeks an injunction for the protection of the vulnerable adult, including (mark appropriate section or sections):

- Prohibiting the respondent from having any direct or indirect contact with the vulnerable adult.
- Immediately restraining the respondent from committing any acts of exploitation against the vulnerable adult.
- Freezing the assets of the vulnerable adult held at \_\_\_\_\_ (name and address of depository or financial institution) even if titled jointly with the respondent, or in the respondent's name only, in the court's discretion.
- Freezing the credit lines of the vulnerable adult at \_\_\_\_\_ (name and address of financial institution) even if jointly with the respondent, in the court's discretion.
- Providing any terms, the court deems necessary for the protection of the vulnerable adult or his or her assets, including any injunctions or directives to law enforcement agencies.

12. Should the court enter an injunction freezing assets and credit lines, the petitioner believes that the critical expenses of the vulnerable adult will be paid for or provided by the following persons or entities, or the petitioner requests that the following expenses be paid notwithstanding the freeze:

Expense	Payee	Address	Account Number	Amount	Why Payment is Critical

I ACKNOWLEDGE THAT, PURSUANT TO SECTION 415.1034, FLORIDA STATUTES, ANY PERSON WHO KNOWS, OR HAS REASONABLE CAUSE TO SUSPECT, THAT A VULNERABLE ADULT HAS BEEN OR IS BEING ABUSED, NEGLECTED, OR EXPLOITED HAS A DUTY TO IMMEDIATELY REPORT SUCH KNOWLEDGE OR SUSPICION TO THE CENTRAL ABUSE HOTLINE. I HAVE REPORTED OR KNOW ON MY OWN PERSONAL KNOWLEDGE THAT THE ALLEGATIONS IN THIS PETITION HAVE BEEN REPORTED TO THE CENTRAL ABUSE HOTLINE.

I HAVE READ EACH STATEMENT MADE IN THIS PETITION AND EACH SUCH STATEMENT IS TRUE AND CORRECT. I UNDERSTAND THAT THE STATEMENTS MADE IN THIS PETITION ARE BEING MADE UNDER PENALTY OF PERJURY PUNISHABLE AS PROVIDED IN SECTION 837.02, FLORIDA STATUTES.

Respectfully submitted this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
**Signature of Petitioner**

Printed Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

\_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me on \_\_\_\_\_, 20\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

Printed Name: \_\_\_\_\_

Personally known  
 Produced identification