

**JUSTICE COURT IN THE TOWNSHIP OF PAHRUMP  
NYE COUNTY, NEVADA**

\_\_\_\_\_  
Applicant (*print your name above*),  
vs.

CASE NO.: \_\_\_\_\_

DEPT: \_\_\_\_\_

\_\_\_\_\_  
Adverse Party (*print the name of the person you  
want protection from above*).

**UCCJEA DECLARATION**

**\*This document will be sealed and kept confidential if requested in section 9\***

**1. Children.**

Child 1:

First Middle Last DOB

Address City, State, Zip Code

When did the child start living here? (*date*) \_\_\_\_\_

Who does the child live with? ☐ Me ☐ Someone else (*name*) \_\_\_\_\_

Child 2:

First Middle Last DOB

Address City, State, Zip Code

When did the child start living here? (*date*) \_\_\_\_\_

Who does the child live with? ☐ Me ☐ Someone else (*name*) \_\_\_\_\_

Child 3:

First Middle Last DOB

Address City, State, Zip Code

When did the child start living here? (*date*) \_\_\_\_\_

Who does the child live with? ☐ Me ☐ Someone else (*name*) \_\_\_\_\_

2. **Nevada Residence.** How long have the children lived in Nevada? (☒ *check one*)

☐ The children have lived in Nevada for the past six months, or since birth.

☐ The children have NOT lived in Nevada for the past six months.

3. **Past Residences.** List the other places the children have lived in the last 5 years.

*Do not include where the children are living now.*

|                   | Who the Child Lived With | City & State Where the Child Lived | Dates Child Lived There (mo/yr – mo/yr) |
|-------------------|--------------------------|------------------------------------|-----------------------------------------|
| <i>Examples →</i> | <i>Sue Jones (mom)</i>   | <i>Las Vegas, NV</i>               | <i>i.e., 5/18-9/18</i>                  |
| Past Residence:   |                          |                                    | _____ - _____                           |
| Past Residence:   |                          |                                    | _____ - _____                           |
| Past Residence:   |                          |                                    | _____ - _____                           |

If the children lived with anyone other than the parents in the last 5 years, write their names and current addresses here: \_\_\_\_\_

4. **Department of Family Services (“DFS”) / Child Protective Services (“CPS”).** Has DFS / CPS been involved with your family? (☒ *check one*)

☐ No.

☐ Yes. When: \_\_\_\_\_ Caseworker’s name: \_\_\_\_\_

5. **Current Custody Case.** Is there a custody order? (☒ *check one*)

☐ No.

☐ Yes, there is a current custody order concerning the child. The order is from case (*case number*) \_\_\_\_\_. It was issued in (*county*) \_\_\_\_\_  
County in the State of \_\_\_\_\_.

6. **Your Participation in Other Cases Concerning the Child.** Have you participated in a case concerning the child as a party, witness, or in some other capacity? (☒ *check one*)

☐ No.

☐ Yes, I have participated in the following cases concerning the child (*list the state, the court name, the case number and the date of the child custody order, if any*):

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

7. **Your Knowledge of Other Cases that You Did Not Participate In.** Do you know of any other case concerning the child that could affect this case, such as other custody cases, protection order cases, or adoptions/terminations? (☒ *check one*)

☐ No.

☐ Yes, the following cases that could affect this case (*list the state, the court name, the parties involved, the case number and the type of case*):

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8. **Persons Other Than You or the Other Party Who Can Claim Custody / Visitation.**

Is there anyone other than you or the adverse party who has custody of the child or who can claim a right to custody or visitation with the child? (☒ *check one*)

☐ No.

☐ Yes, the following people have custody or can claim custody/visitation of the child: (*list names and addresses of anyone who claims custody/visitation rights*):

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9. **Confidentiality.** Would your health/safety/liberty or the child's health/safety/liberty be in danger if the information in this document is released to the adverse party? (☒ *check one*)

☐ Yes. This document should be sealed pursuant to NRS 125A.385(5). ***Note: the court may release this information to the other party after a hearing if the court orders the disclosure.***

☐ No. This document may be provided to the adverse party.

**I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.**

DATED \_\_\_\_\_, 20\_\_\_\_.

Submitted By: (*your signature*) \_\_\_\_\_

(*print your name*) \_\_\_\_\_