

Instructions for Motion to Dissolve an Injunction for Protection Against Exploitation of a Vulnerable Adult

When should this form be used?

This form may be used to dissolve an injunction for protection against exploitation of a vulnerable adult. No specific allegations are required for dissolution of the injunction.

Who may file this form?

This form may be filed by:

- The petitioner who obtained an injunction for protection against exploitation of a vulnerable adult;
- The respondent against whom an injunction for protection against exploitation of a vulnerable adult was entered; or
- The vulnerable adult about whom an injunction for protection against exploitation of a vulnerable adult was entered.

**IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT
IN AND FOR SEMINOLE COUNTY, FLORIDA**

Case No.: _____
Division: _____

Petitioner,

v.

Respondent,
_____ /

**MOTION TO DISSOLVE INJUNCTION AGAINST
EXPLOITATION OF A VULNERBLE ADULT**

I, _____, being sworn, certify that the following statements are true:

1. I am the ___Petitioner/ ___Respondent/ ___Vulnerable Adult in this case.
2. I currently live at the following address: _____

And my telephone number is: _____

3. This is a request to dissolve the Injunction Against Exploitation of a Vulnerable Adult entered on _____, 20__.
4. I am asking the Court to dissolve the injunction because: _____

5. I understand that the Court may hold a hearing on this motion and, if so, that I must appear at the hearing.

For the foregoing reasons, I ask the Court to dissolve the Injunction Against Exploitation of a Vulnerable Adult entered on _____, 20__.

I understand that I am swearing or affirming under oath to the truthfulness of the factual claims made in the motion and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

I HEREBY CERTIFY that a true copy of the foregoing Motion was delivered to _____ by U.S. mail or E-Service on _____.

Dated: _____

Signature of Party
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____
Designated E-mail Address(es): _____
