

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

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

v.

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

Division: \_\_\_\_\_

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

**STIPULATION TO ENTRY OF FINAL RISK PROTECTION ORDER**

Petitioner and Respondent agree to the entry of, and authorize the Court to enter, a Final Risk Protection Order and further agree to each of the terms below:

1. Respondent waives his/her right to present evidence to the Court and to require the Petitioner to prove its entitlement to a Final Risk Protection Order by clear and convincing evidence at a final hearing in this matter. The final hearing shall be cancelled.
2. Respondent waives his/her right to consult with an attorney and chooses to proceed without the assistance or advice of an attorney **or** if an attorney represents Respondent, Respondent has discussed the stipulation with the attorney and is fully satisfied with the attorney's representation.
3. Upon entry of the Final Risk Protection Order, Respondent shall immediately surrender to the petitioning law enforcement agency all firearms and ammunition in his/her custody, control, or possession along with any license to carry a concealed weapon or firearm.
4. The Final Risk Protection Order shall be for a period of \_\_\_ months.
5. While the Final Risk Protection Order is in effect, Respondent shall not have in his/her custody, control, or possession any firearm or ammunition.
6. Respondent shall undergo a mental health evaluation within sixty (60) days of the entry of the Final Risk Protection Order and shall file a copy of said evaluation with the Clerk of the Court within seventh-five (75) days.
7. Respondent voluntarily enters into this stipulation without pressure or coercion.

*A violation of a Risk Protection Order is a third degree felony, punishable by up to 5 years in prison and a \$5,000 fine.*

**PETITIONER:**

Signature \_\_\_\_\_

Name \_\_\_\_\_

Agency \_\_\_\_\_

**COUNSEL FOR PETITIONER** if applicable

Signature \_\_\_\_\_

Name \_\_\_\_\_

**RESPONDENT:**

Signature \_\_\_\_\_

Name \_\_\_\_\_

**COUNSEL FOR RESPONDENT** if applicable

Signature \_\_\_\_\_

Name \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF VOLUSIA

Before me this day personally appeared \_\_\_\_\_  
[Respondent], who after showing proper identification to me, identified himself/herself to be the person described in and who executed the foregoing instrument.

WITNESS my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, 2019.

\_\_\_\_\_  
Notary Public - State of Florida

(Seal)

\_\_\_\_\_  
(print, type or stamp name)

Commission No.: \_\_\_\_\_