

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
<http://www.courts.state.nh.us>

Court Name: _____

Case Name: _____

Case Number: _____ PNO: _____
(if known)

**MOTION AND AFFIDAVIT FOR RETURN OF DEADLY WEAPONS
OTHER THAN FIREARMS**

Pursuant to RSA 173-B, RSA 633:3-a, or 169-C

_____, V. _____
Plaintiff Defendant Def Date of Birth

NOW COMES the defendant, _____, and respectfully represents and requests the following:

1. Pursuant to a Domestic Violence or Stalking Protective Order, or violation of a 169-C Stay Away Protective Order, my deadly weapons (specify: _____) was/were relinquished to:
 - _____ Police Department
 - State Police Troop/Unit _____
 - Fish & Game
 - _____ County Sheriff's Department
2. The Order has expired or will expire on _____ and I would like return of my deadly weapons.
3. I have not been convicted of any felony in any state or federal court (including the District of Columbia, Commonwealth of Puerto Rico, territory or possession), nor am I on probation or parole for any crime, nor am I subject to any bail order prohibiting possession of deadly weapons.
4. My date of birth is _____, and I was born in the State of _____
5. My current address and telephone number are: _____
6. Race: White Black American Indian/Alaskan Native Asian or Pacific Islander Unknown
7. Physical Description:
 - a. Eye Color _____
 - b. Hair Color _____
 - c. Height _____ (feet) _____ (inches)
 - d. Weight _____ (pounds)
8. I request a search of all pertinent records to determine whether I am prohibited by RSA 159:3 or otherwise from possessing deadly weapons.
9. I request a hearing on my motion.

Date Signature of Defendant
State of _____, County of _____

This instrument was acknowledged before me on _____ by _____
My Commission Expires _____
Affix Seal, if any Clerk of Court/Deputy Clerk/Justice of Peace/Notarial Officer