

WRIT OF RETRIEVAL

If a person is unable to enter a residence or former residence to retrieve property belonging to the person or the person's dependent because the current occupant is denying the person entry, the person may apply to the Justice Court for an order authorizing the person to enter the residence, accompanied by a peace officer, to retrieve specific items of personal property according to the Texas Property Code Section 24A.002.

The applicant, under oath must certify that the applicant or the applicant's minor dependent requires personal items located in the residence that are only of the following types:

- medical records;
- medicine and medical supplies;
- clothing;
- child care items;
- legal or financial documents;
- checks, bank cards or credit cards in the same name as the applicant;
- employment records; or
- personal identification documents
- assistance or service animals
- wireless communication devices
- tools, equipment, books and apparatus used by applicant in their trade/profession

If the Judge grants the application, a bond will be set, a hearing date and time will be issued and the occupant will be served by the Constable with notice of the hearing.

To determine venue for your case, refer to the Texas Property Code Section 24A.002.

FORMS NEEDED:

Application for Writ of Retrieval

140 N. Garland Avenue, Garland, TX 75040 Phone: (214) 643-4773 • Fax (214) 643-4772

E-mail: JP21Court@dallascounty.org • Website: www.JudgeMO.com

	CAUSE NUMBER: JS		D
		§	IN THE JUSTICE COURT
– Pe	etitioner	_ § _ §	PRECINCT 2, PLACE 1
		§	
		§	DALLAS COUNTY, TEXAS
	APPLICATION FO	OR WRIT	OF RETRIEVAL
	dersigned Applicant makes this Application for n, which is a residence in which Applicant is, or wa		etrieval of personal property found at the following , authorized to occupy ("Residence"):
LOCATI	ON OF RESIDENCE:		
Occupa	ont ic		, who is currently occupying the residence and may
be give	n notice of this Application at the above-listed Re	sidence or a	t the following address(es):
Fax:			
Phone: E-Mail:			-
	lowing is a <u>listing and specific description</u> of the in separate sheet, if necessary):	tems that I s	seek to be allowed to retrieve from the Residence
Attuch	separate sneet, if necessary).		
I certify	that all of the following statements are true:		
1)		ancial docun	owing types: medical records, medicine and medical nents (including electronic records), checks or bank or and personal identification documents.
2)	I will suffer personal harm and/or the personal health and safety of myself or others within my care will likely be at risk if I am unable to retrieve the items, and I have an urgent need to retrieve the items from the Residence.		
3)	I have attached a lease, sworn statement or other documentary evidence showing that I am, or was previously, authorized to occupy the Residence. I am currently unable to enter the Residence because the current occupant named above has denied me access to the Residence or poses a clear and present danger of family violence to myself or my dependents.		
4)	I am not the subject of an active protective order under Title 4, Family Code, a magistrate's order for emergency protection under Article 17.292, Code of Criminal Procedure, or any court order prohibiting my entry into the Residence; or otherwise prohibited by law from entering into the Residence.		
 Applica	nt's Signature		 Date

Email

Address & Phone Number