THE STATE OF NEW HAMPSHIRE JUDICIAL BRANCH

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Cou	urt Name:				
Cas	se Name:				
	se Number:				
(if k	known) PETIT	ION TO ANN RSA 45	IUL MARRIAGE 8:1-3		
	Petitioner Name				
[Date of Birth	E-mail Addre	ess (optional)		
I	Residence Address				
I	Mailing Address (if different)				
-	Telephone Number (Home)		(Work)		
2. I	Respondent Name				
			ess (optional)		
I	Residence Address				
	Mailing Address (if different)				
-	Telephone Number (Home)		(Work)		
3. (City and state where parties were m	arried			
[Date of Marriage				
4. I	Is either party currently a resident of	New Hampshire	(P) (R)		
<u>5. l</u>	List minor children born to or adopte				
	Name	Date of Birth	Current Address		
lf the	ere are minor children born to or a	adopted by the r	parties either before or during the marriage,		

complete questions 6 – 10. This information is required under RSA 458-A, the Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA).

It is important that you answer these questions with as much detail and accuracy as possible. Lack of adequate information could significantly delay orders being issued in your case.

There are several situations that might result in New Hampshire exercising jurisdiction over child/ren. The continuous presence of the child/ren in New Hampshire for six (6) months is not the only basis for jurisdiction. In some emergency situations, the court may be able to exercise jurisdiction on a temporary basis.

Case Name:

PETITION FOR ANNULMENT

6. List the places where the minor child/ren of the parties has/have lived in the last **five (5) years** and the names of the people they lived with at that time, if you know. Start with where the child lives now and work backward in time.

Dates	Town/City, State	Parent(s)/Caretaker	Current Address/Contact	Which
From/To			Address of Parent/Caretaker	Child/ren

If more space is needed, attach Extra Page (Form NHJB-2656-FPS).

7. Are there any person(s), not a party to this proceeding, who have physical custody of the child/ren or who claim to have custody, physical custody or parenting time rights? If yes, list name(s) and address(es) of person(s):

8. Check one of the following:

I have not participated in any court case(s) concerning the custody, visitation, parenting time or placement of the child/ren in this or any other state.

OR

□ I have participated in court case(s) concerning the custody, visitation, parenting time or placement of the child/ren in this or any other state. I have participated in the following:

Name of Court	State	Case No.	Date of Court Order

9. Are there any actions for enforcement, or proceedings relating to domestic violence, domestic relations, protective orders, marriage dissolution, paternity, legitimation, custody, parental rights and responsibilities, termination of parental rights, adoption, juvenile, or other proceedings in any court in any state affecting any children named in this petition or parents of those children? Yes No If yes, complete the following:

			, complete the following.
Name of Court	State	Case No.	Type of Court Case
			,,

Case	Name:
0400	

-		
Caco	Number:	
Case	number.	

PETITION FOR ANNULMENT

10. Optional: 🔲 I am alleging, under oath, that my or my child/ren's health, safety, or liberty would be
jeopardized by the disclosure of identifying information set forth in this Petition. To support my allegation, I
state as follows:

11.	1. To the knowledge of the parties, is either party pregnant?			🗌 No
12.	Do the parties own real estate jointly? Does the petitioner own real estate individually? Does the respondent own real estate individually?		☐ Yes ☐ Yes ☐ Yes	☐ No ☐ No ☐ No
13.	State the cause for this annulment: Either party has a wife or husband living, I Consanguinity or affinity of parties Marriage induced by duress Other:	Marriage induced by fraud	e alive	
14.	Requests for court orders:			
The	Petitioner respectfully requests:			
	The Court grant an Annulment of this Marriage riage to be annulled in accordance with RSA 4		or establishing	this
	Other:			
	knowledge that I have a continuing duty to e that could affect the child/ren in this case	•	tion in this or	any other
lsw	ear or affirm that the foregoing information is t	rue and correct to the best of my k	nowledge.	
Date	9	Signature of Petitioner		
	State of	, County of		
This	s instrument was acknowledged before me on	by		

My Commission Expires _____ Affix Seal, if any

Printed Name, Address and Phone Number of Attorney

Signature of Attorney for Petitioner

Signature of Notarial Officer / Title

Bar #