

**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 \_\_\_\_\_ c. Height \_\_\_\_\_ (feet) \_\_\_\_\_ (inches)
  - b. Hair Color \_\_\_\_\_ 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