

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
<https://www.courts.nh.gov>

Court Name: _____

Case Name: Petition to Expunge founded report against _____

Case Number: _____
(if known)

PETITION TO EXPUNGE (REMOVE)
(RSA 161-F:49, X)

1. Petitioner Name _____ Date of Birth _____

Residence Address _____

Mailing Address (if different) _____

Telephone Number (Home) _____ (Work) _____

2. Victim's Name _____ County where incident occurred _____

3. Date of BEAS Finding _____

Check the appropriate box or boxes Abuse Neglect Exploitation

4. The petitioner states as follows:

As of _____ (date) my name is listed on the Bureau of Elderly and Adult Services (BEAS) State Registry of founded reports of abuse, neglect and exploitation.

It has been (check one):

More than one (1) year since the founded report against me and its entry onto the BEAS State Registry.

Three (3) or more years since the denial of my last petition to have the founded report against me expunged (removed) from the BEAS State Registry.

5. Attached is a certified copy of my criminal record check results as required by RSA 161-F:49, X (b).

6. I certify that, since the date of the finding referenced in #4, there have been no other findings against me for abuse, neglect or exploitation against either an adult or a child.

7. In addition, I ask the court to consider the following information in support of the Petition to Expunge. (Attach additional pages if necessary.)

8. Please explain why you do not pose a present threat to the safety of individuals (adults and children).

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9. Please explain what efforts you have taken, if any, to eliminate the likelihood of recurrence of the type of behavior that resulted in the entry onto the registry.

Upon the court's receipt and review of the information provided by BEAS, I request that the court grant this Petition to Expunge and order BEAS to remove the founded report from the Bureau of Elderly and Adult Services State Registry.

I certify that a copy of this document has been provided to BEAS State Registry at Thayer Building, 97 Pleasant Street, 2nd floor, Concord NH 03301.

Date

Petitioner Signature

State of _____, County of _____

This instrument was acknowledged before me on _____ by _____

My Commission Expires _____

Affix Seal, if any

Signature of Notarial Officer / Title

FOR COURT USE ONLY

NOTICE TO BEAS STATE REGISTRY

BEAS shall submit a report to the court within 30 days of this notice concerning all additional founded abuse, neglect or exploitation reports and other additional information relative to the petitioner.

Date

Court Staff Signature

ORDER

The Petition to Expunge is granted. The Bureau of Elderly and Adult Services shall remove the petitioner's founded report from the State Registry.

The Petition to Expunge is denied.

Date

Signature of Judge

Name of Judge