AOC-DNA-2.1

Doc. Code: AECO

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Commonwealth of Kentucky
Court of Justice www.kvco



Case No	Case No					
Court	☐ District	□ Family				
County						
Division						

KRS 620.060; FCRPP 18			EMERGENCY CUSTODY ORDER AFFIDAVIT		Division	Division		
			a temporary emergenc	y custody order (E		ECO is not granted, you cy/Neglect or Abuse Petition		
IN TH	E INTEREST OF:					, A CHILD		
	DOB	;	Sex	Race		SSN		
						_		
Ι,						h the following statements		
are tru	ie to the best of my kn	owledge (if n	nore space is needed, a	ttach second pag	re):			
					· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·							
					· · · · · · · · · · · · · · · · · · ·			
					· · · · · · · · · · · · · · · · · · ·			
1. Th	ne statements above o	reate reason	to believe that the follo	wing condition(s)	exist: (che	ck all that apply)		
П	The child is in dange	r of imminent	death or serious physic	cal injury or is heir	na seyually	/ ahused:		
_	· ·		. ,	, ,		cidental means physical		
_	injury or emotional in	•	y infinition of allowed to	be inflicted by our	ior triair ao	oldental medilə priyoledi		
П			due to the failure or refu	sal of the parent(s) to provid	de for the safety or needs of		
_	the child.	nate danger t	due to the failule of feld	sai of the parent	s) to provid	de for the salety of ficeus of		
	the child.							
2 ^-	manufact by KDC 620	020(4) have		na thaca facts to	tha fallacci			
2. AS			e made a report regardi	_				
	□ Local law enforce			☐ Cabinet for H		•		
	☐ Kentucky State F	'olice		☐ Commonweal	•	/		
	☐ County Attorney			Did not report				
	If you did not report,	please explai	n why:					
2 Ta	. v.o.um kapovilo dajo o oso	there or how	a thara baan any court	or Cabinat assas	or process	dings related to the shild		

3. To your knowledge, are there, or have there been, any court or Cabinet cases or proceedings related to the child in this county or any other county/state? Yes ■ No

Case No.		

4.	a.	If removal from the custodial parent is requested, has the non-custodia	al parent been	contac	ted fo	or pla	cement
		of the child?	☐ Yes		No		
		If No, was the non-custodial parent considered for placement?	☐ Yes		No		
	b.	Is there any existing Order which restricts placement with the non-cus	todial parent?		Yes		No
		If Yes, list state, county, case number and date of order if known (or	attach copy if a	ıvailab	ole):		
	C.	Is there any other reason the non-custodial parent was not considered	for placement	? 🗆	Yes		No
		If Yes, please explain why the non-custodial parent was not contacte	ed or considere	d for p	lacen	nent:	
5.	Cor	mplete the following information:					
		nile's Address(es):					
Ju	ven	nile currently resides ataddress		(co	ounty)		
wit	h 🗆	☑ Mother ☑ Father ☑ Other	·				
Ju	ven	nile ordinarily resides at (if different from above)					(county)
wit	h 🗆	☐ Mother ☐ Father ☐ Other					, ,,
Ju	ven	nile will reside at (if known)address		(co	ounty)		
		☐ Mother ☐ Father ☐ Other				ain I	below)
Ju	ven	nile attends school at					
Ju	ven	nile's Phone No.: ()					
	ver	nile's Legal Mother:					
Ad	dre	ess:					
En	nail	Address (if known):					
Ph	one	e No.: (DOB:	Legal Cust	odian?	? 🗆 Ye	es 🗆	l No
		e of Other(s) Living in Mother's Home and relationship to the					
		epparent:					
_	Sik	oling(s):					
_	Otl	hor·					
_	- Ci	her:					

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Juvenile's Legal Father:	
Address:	
Email Address (if known):	
Phone No.: (SSN:	DOB: Legal Custodian? □ Yes □ No
Name of Other(s) Living in Father's Home and	relationship to the Child:
□ Stepparent:	
☐ Sibling(s):	
□ Other:	
	reining quatedial control or quantician of the child (DECCC)
in Name, address and relation of other person(s) exer	rcising custodial control or supervision of the child (PECCS)
Email Addross (if known):	
Email Address (if known):	DOB: Legal Custodian? □ Yes □ No
Name of Other(s) Living in the PECCS's Home and	relationship to the Child.
Affiant states the foregoing allegation	s are true based upon information and belief.
Afficiation Name (Print/Time)	
Affiant's Name (Print/Type):	
Affiant's Address:	
Affiant's Relationship to the Child:	Phone No. ()
Date:, 2 Affian	t's Signature:
	<u> </u>
STATE OF	
COUNTY OF	
Subscribed and sworn to before me $lacksquare$ in my pres	sence $oldsymbol{\square}$ via oral communication on this the day of
, 2, at 🗖 a.m.	□ p.m.
If a Nataran Management of the control	
If a Notary: My commission expires:	-
	Notary Public or Circuit Clerk/D.C.

Distribution:

Court file