

PIERCE COUNTY JUVENILE COURT  
5501 SIXTH AVENUE  
TACOMA, WASHINGTON 98406  
(253) 798-7900

## **JUVENILE OFFENDER RECORDS** **SEALING PROCEDURE**

**ATTACHED YOU WILL FIND:**

- A. Instructions on Pierce County Juvenile Court's Procedure for Sealing Records of Juvenile Offenders
- B. Motion and Declaration to Seal Records of Juvenile Offender
- C. Notice of Motion to Seal Records of Juvenile Offender

***PLEASE BE ADVISED THAT COURT OFFICIALS, COURT CLERKS, AND PROSECUTORS ARE NOT PERMITTED TO GIVE YOU LEGAL ADVICE.***

***YOU MAY WISH TO CONSULT AN ATTORNEY IF YOU HAVE QUESTIONS.***

More information is available at: [www.nwjustice.org](http://www.nwjustice.org) and [www.courts.wa.gov](http://www.courts.wa.gov).

These materials will assist you in the procedure for sealing **ONLY** Pierce County Juvenile Court Offender Records. If you were charged in any other county, you must file a separate motion in that county.

### **Motion and Declaration to Seal Records of Juvenile Offender**

Please use BLUE ink and PRINT all information clearly. You are the respondent. You will need to know the specific charges and the date you were sentenced. If you do not have this information, it may be obtained from the Pierce County Juvenile Court Clerk's Office located at 5501 Sixth Avenue, Tacoma, Washington 98406. There may be a fee for this information. Mark the appropriate box that pertains to your particular situation, either 2.2 or 2.3, then sign and date the Motion and Declaration.

**THE COURT WILL NOT ORDER ANY OTHER AGENCY TO SEAL ITS RECORDS UNLESS YOU NOTIFY THE AGENCY IN ADVANCE THAT YOU ARE REQUESTING THE COURT TO ENTER SUCH AN ORDER.**

## **Notice of Respondent's Motion to Seal Records of Juvenile Offender**

Please use BLUE ink and PRINT all information clearly. You are responsible for notifying **ALL** parties involved in your case(s). The Notice lists several agencies and their addresses. If there was an agency involved with your case(s) that is not listed, fill in the name(s) in the space provided.

The Incident No. is the specific number assigned on a law enforcement report. Fill in this number in the space provided. If you do not have this information, it may be obtained from the Pierce County Juvenile Court Clerk's Office. There may be a fee for this information.

In the section below "**Waiver of Hearing on Sealing of Records**," you are the Moving Party. Fill in your name, address, and the Agency Incident No. **DO NOT** fill out the bottom of the Notice. This information will be completed by the agency that receives your packet.

When you have completed filling out the packet, make a copy for each listed agency and keep a copy for your own records. Take the original to the Pierce County Juvenile Court Clerk's Office. A Court Clerk will stamp the documents and file them with the Court.

You **MUST** personally deliver a copy of your packet to the Office of the Prosecuting Attorney at 5501 Sixth Avenue, Tacoma – **B LOBBY**. In addition, you **MUST** either mail or personally deliver a copy to any other listed agencies.

The agencies that receive your packet will review the motion and complete a records check. You will be notified of the outcome and any court dates scheduled to address your motion.

**IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON  
IN AND FOR THE COUNTY OF PIERCE  
JUVENILE COURT**

STATE OF WASHINGTON,

Plaintiff,

vs.

CAUSE NO. \_\_\_\_\_

**MOTION AND DECLARATION TO SEAL  
RECORDS OF JUVENILE OFFENDER  
PURSUANT TO RCW 13.50.050(11)  
(MTAF)**

\_\_\_\_\_

DOB: \_\_\_\_\_

JUVIS NO. \_\_\_\_\_

Respondent.

**I. MOTION**

RESPONDENT moves the court for an order sealing his or her juvenile court records. This motion is based on RCW 13.50.050 (11) and (12) and the declaration of respondent.

Dated: \_\_\_\_\_  
Respondent

**II. DECLARATION OF RESPONDENT**

I, \_\_\_\_\_, state as follows:

2.1 On \_\_\_\_\_ (date) I was found guilty of \_\_\_\_\_  
\_\_\_\_\_ (name of offense).

2.2  B Felony Conviction: Since my last date of release from confinement, including full-time residential treatment, or from the entry of disposition, I have spent \_\_\_\_\_ consecutive years in the community without committing any offense or crime that has resulted in conviction.

2.3  C Felony, Misdemeanor and Gross Misdemeanor Convictions. Since my last date of release from confinement, including full-time residential treatment, or from the entry of disposition, I have spent \_\_\_\_\_ consecutive years in the community without committing any offense or crime that has resulted in conviction.

2.4 There are no proceedings pending against me seeking the conviction of a juvenile or criminal offense.

- 2.5 I have not been convicted of a class A felony or sex offense.
- 2.6 Full restitution has been paid.
- 2.7 I am eligible to have my records sealed under RCW 13.50.050(11) and (12) in that I have satisfied all the requirements of those statutes.
- 2.8 That I have given reasonable and proper notice of this motion to all parties by mailing or personally serving them a copy of these documents.

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is, to the best of my knowledge, true and correct.

Signed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, Washington.

\_\_\_\_\_  
Respondent

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

**IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON  
IN AND FOR THE COUNTY OF PIERCE  
JUVENILE COURT**

STATE OF WASHINGTON,

Plaintiff,

vs.

CAUSE NO. \_\_\_\_\_

\_\_\_\_\_

DOB: \_\_\_\_\_

JUVIS NO. \_\_\_\_\_

Respondent.

**NOTICE OF RESPONDENT'S MOTION  
TO SEAL RECORDS OF JUVENILE  
OFFENDER PURSUANT TO RCW  
13.50.050(11)  
(NT)**

TO: Pierce County Juvenile Court Clerk's Office, 5501 6<sup>th</sup> Avenue, Tacoma, WA 98406

TO: Pierce County Prosecutor, Juvenile Division, 5501 6<sup>th</sup> Avenue, Tacoma, WA 98406

TO: Washington State Patrol, P.O. Box 42633, Olympia, WA 98504-2633

TO: LESA Records, 930 Tacoma Avenue S., Room 239, Tacoma, WA 98402

TO: \_\_\_\_\_ Police Department/Sheriff's Office Incident No. \_\_\_\_\_

TO: \_\_\_\_\_ Incident No. \_\_\_\_\_

TO: \_\_\_\_\_ Incident No. \_\_\_\_\_

**WAIVER OF HEARING ON SEALING OF RECORDS**

MOVING PARTY: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

AGENCY/INCIDENT NO.: \_\_\_\_\_

I, \_\_\_\_\_, am (Circle One) **EMPLOYED BY/REPRESENT** the (Agency Name) \_\_\_\_\_. I have had an opportunity to review the attached Motion and Affidavit. After reviewing these documents and the respondent's criminal history, I believe the respondent is (Circle One) **PROPERLY/NOT** eligible to have his/her records sealed. On behalf of the \_\_\_\_\_, I therefore (Circle One) **WAIVE/DEMAND** the right to be present at a court hearing on this matter.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title