

**STATE OF MAINE  
WEAPONS RESTRICTION ORDER  
34-B MRS § 3862-A**

**NOTICE OF SERVICE ON RESTRICTED PERSON**

TO: \_\_\_\_\_

1. Law enforcement took you into protective custody.
2. A qualified medical practitioner found that you currently present a likelihood of foreseeable harm, and a judicial official endorsed that determination.
3. You may not possess, control, or acquire or attempt to possess, control, or acquire a firearm or other dangerous weapon until a court dissolves the restriction. You must surrender to law enforcement any firearms or other dangerous weapons currently in your possession or control. If you immediately comply with the surrender order, you are not subject to arrest or prosecution as a person prohibited from possessing or controlling dangerous weapons.
4. If you do not comply with the surrender order or if you possess, control, or acquire or attempt to possess, control, or acquire a dangerous weapon during the period of restriction, you are subject to arrest and prosecution as a person prohibited from possessing or controlling dangerous weapons.
5. You have a right to a court hearing within 14 days of this notice during which you may engage legal counsel, which a court may appoint if you are indigent.
6. Any firearms or other dangerous weapons you surrendered to law enforcement will be returned to you if the court dissolves the restrictions.

|  |                                       |                          |
|--|---------------------------------------|--------------------------|
| _____                                    | _____                                 | _____                    |
| (Printed Name of Officer Making Service) | (Signature of Officer Making Service) | (Date & Time of Service) |
| _____                                    | _____                                 |                          |
| (Printed Name of Restricted Person)      | (Signature of Restricted Person)      |                          |

**METRO Entering Agency must enter information in METRO upon service of order.  
Transmit Service of Order to the District Attorney's Office with jurisdiction  
over the restricted person's place of residence.**

|                           |          |          |  |
|---------------------------|----------|----------|--|
| METRO Entry made on _____ | at _____ | by _____ |  |
| (Date)                    | (Time)   |          |  |

|                                     |          |          |  |
|-------------------------------------|----------|----------|--|
| Transmitted to DA's Office on _____ | at _____ | by _____ |  |
| (Date)                              | (Time)   |          |  |