



**MIAMI DADE COUNTY
CLERK OF THE COURT AND COMPTROLLER**

**HOPE
CARD
REQUEST FORM**

Hope Cards are FREE and available to PETITIONERS with a valid FINAL judgment on injunction for protection issued by a Florida Court. This includes domestic violence, repeat violence, dating violence, sexual violence, stalking, and exploitation of vulnerable adult final injunctions. Hope Cards can be requested at the time the final judgment for protection is issued or at any other time before the expiration of the final order for protection. Hope Cards are valid for 2 year periods and may be renewed after the 2 year period if the final injunction is still in effect. Hope Cards are not issued for emergency protective orders, stay away orders, or “no contact” orders.

Instructions: You will need to refer to the final injunction for protection issued by the court to complete this form. Please print all information as neatly and completely as possible when filling out the form. Submit the completed form to an Intake Office in the County where the injunction was issued.

Hope Cards are emailed within 3 business days of the Clerk entering the request into the system. If you do not receive your card within this period, you may contact the Clerk’s Office to check on the status of your request.

Lawson E. Thomas Courthouse Center	175 NW First Avenue, Mezzanine Miami, Florida 33128	(305) 349-5813
Joseph Caleb Center Court	5400 NW 22nd Avenue, Suite # 218 Miami, Florida 33142	(305) 636-2415
Hialeah District Court	11 E. 6th Street, Suite #108 Hialeah, Florida 33010	(305) 520-4031
North Dade Justice Center	15555 Biscayne Boulevard, Suite # 112 North Miami, FL 33160	(305) 354-8728
South Dade Justice Center	10710 SW 211th Street, Suite #1100 Miami, Florida 33189	(305) 252-5807
Miami Dade County Courthouse (for exploitation of vulnerable adult injunctions)	73 W. Flagler Street, Suite # 234 Miami, Florida 33130	(305) 349-7475

Please complete the following:

Case Number: _____ Final Injunction Issue Date: _____

Respondent’s Name: _____ Respondent’s date of birth: _____

Petitioner’s Name: _____ Petitioner’s date of birth: _____

Petitioner’s Address: _____ check if confidential

Petitioner’s Phone Number: _____ check if confidential

Petitioner’s Email Address: _____ check if confidential

For internal use: Hope Card provided to Petitioner on _____ (date) by _____ (clerk) via
 email US mail hand delivery in the office.