

PROBATE COURT OF CUYAHOGA COUNTY, OHIO

ANTHONY J. RUSSO, Presiding Judge

LAURA J. GALLAGHER, Judge

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NUMBER _____

**APPLICATION FOR APPOINTMENT OF GUARDIAN
OF ALLEGED INCOMPETENT
[R.C. 2111.03]**

Applicant represents to the Court that _____ resides or has a legal
settlement at _____ in _____ County, Ohio and that
the prospective ward is incompetent by reason of (R.C. 2111.01(D))
_____.

The proposed ward's date of birth is _____.

A Statement of Expert Evaluation is attached. (Form 17.1)

A list of Next of Kin of Proposed Ward is also attached. (Form 15.0)

The whole estate of the prospective ward is estimated as follows:

Personal Property.....\$ _____
Real Estate.....\$ _____
Annual Rents.....\$ _____
Other annual income.....\$ _____

Applicant represents that the applicant is not an administrator, executor or other fiduciary of the estate wherein the alleged incompetent is interested.

Applicant offers the attached bond in the amount of \$_____.

Applicant further represents that a guardian of the alleged incompetent is necessary in order that
 the ward the ward's property
may be taken proper care of and asks that a guardian be appointed.

TYPE OF GUARDIANSHIP APPLIED FOR IS [check the applicable boxes]

non-limited limited person and estate estate only person only

If limited guardianship is applied for, the limited powers requested are

_____.

The time period requested is indefinite definite to _____

Applicant's relationship to alleged incompetent is _____

The Applicant has has not been charged with or convicted of a crime involving theft, physical violence, or sexual, alcohol or substance abuse except as follows (if applicable, state date and place of each charge or each conviction.)

The Applicant represents that a guardian has been nominated in a writing pursuant to R.C. 1337.09(D) or R.C. 2111.121.
The nominated person is _____

The nominated person's contact information is listed on Form 15.0 (Next of Kin).

A copy of the document which nominates the guardian is attached.

The Applicant represents that the proposed ward had military service.

Military I.D.: _____

Branch of service: _____

Dates of service: _____

Applicant represents that the address provided is the applicant's permanent address and acknowledges the requirement that the court be notified of any change of address. Removal may result from a failure to comply with this requirement.

Attorney Signature for Applicant

Applicant Signature

Typed or Printed Name

Typed or Printed Name

Address

Age

City State Zip

Address

Phone Number (include Area Code)

City State Zip

Email Address

Phone Number (include Area Code)

Attorney Registration No.

Email Address

PROBATE COURT OF CUYAHOGA COUNTY, OHIO

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GUARDIANSHIP OF _____

CASE NUMBER _____

**FIDUCIARY'S ACCEPTANCE
GUARDIAN
[R.C. 2111.14]**

I, the undersigned, hereby accept the duties which are required of me by law, and such additional duties as are ordered by the Court having jurisdiction.

AS GUARDIAN OF THE ESTATE, I WILL:

1. Make and file an inventory of the real and personal estate of the ward within 3 months after my appointment.
2. Deposit funds which come into my hands in a lawful depository located within this state.
3. Invest surplus funds in a lawful manner.
4. Make and file an account biennially, or as directed by the Court.
5. File a final account within 30 days after the guardianship is terminated.
6. Inventory any safe deposit box of the ward.
7. Preserve any and all Wills of the ward as directed by the Court.
8. Expend funds only upon written approval of the Court.
9. Make and file a guardian's report biennially, or as directed by the Court.

AS GUARDIAN OF THE PERSON, I WILL:

1. Protect and control the person of my ward, and make all decisions for the ward based upon the best interest of the ward.
2. Provide suitable maintenance for my ward when necessary.
3. Provide such maintenance and education for my ward as the amount of the estate justifies if the ward is a minor and has no parents, or has a parent who fails to maintain or educate the ward.
4. Make and file a guardian's report biennially, or as directed by the Court.
5. Obey all orders and judgments of the Court pertaining to the guardianship.
6. Obtain the written approval of the Court before executing a caretaker power of attorney authorized by R.C. 3109.52.

If I change my address or the ward's address, I shall immediately notify Probate Court in writing. I acknowledge that I am subject to removal as such fiduciary if I fail to perform such duties. I also acknowledge that I am subject to possible penalties for improper conversion of the property which I hold as such fiduciary.

Date

Fiduciary