PROBATE COURT OF HURON COUNTY, OHIO TIMOTHY L. CARDWELL, JUDGE

GUARDIANSHIP OF					
CASE NO					
APPLICATION FOR APPOINTMENT OF GUARDIAN					
OF ALLEGEDINCOMPETENT					
[R.C. 2111.03]					

Applicant represents to	he Courtthat				resides or has a legal		
settlement at			County, Ohio and that				
the prospective ward is incompetent by reason of (R.C. 2111.01(D))							
The proposed ward's da	te of birthis_						
A Statement of Exp	ert Evaluation	n is attached.	(Form 17.1)				
A list of Next of Kin	of Proposed	Ward is also	attached. (Fo	orm 15.0) The			
whole estate of the	prospective w	ard is estima	ted as follow	s:			
Pe	rsonal Proper	ty	\$		<u> </u>		
Re	al Estate		\$				
An	nualRents		\$				
Ot	ner annual inc	ome	\$				
Applicant represents tha alleged incompetent is in		t is not an adr	ministrator, e	xecutor or other fidu	ciary of the estate wherein the		
Applicant offers the attac	ched bond in t	he amount of	\$		e.		
Applicant further represent the ward ward ward's p							
TYPE OF GUARDIAN	SHIP APPLI	ED FOR IS	check the appl	icable boxes]			
non-limited [limited	person a	nd estate	estate only	person only		
If limited guardianship is	applied for, th	ne limited pow	ers requeste	d are			

[Reverse of Form 17.0]

The t	ime period requested is \square indefinite \square de	finite to						
Applic	cant's relationship to alleged incompete	ent is						
	pplicant has (not) been charged with or convict of or substance abuse except as follows (if a ction.)	pplicable, state da	ate and place of each	n charge or each				
	The Applicant represents that a guardian has 2111.121. The nominated person is	been nominated i	n a writing pursuant to	R.C. 1337.09(D) or R.C.				
	The nominated person's contact information is listed on Form 15.0 (Next of Kin).							
Ш	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 provid the requirement that the court be notified of comply with this requirement.							
Attorn	ney for Applicant	Applicant	Applicant					
Турес	d or Printed Name	Typed or Pr	Typed or Printed Name					
Addre	ess	Age	Age					
City	State Zip	Permanent	Address					
Telep	hone Number (include area code)	City	State	Zip				
Attorn	ney Registration No.	Telephone I	Telephone Number (include area code)					

CASE NO._____