

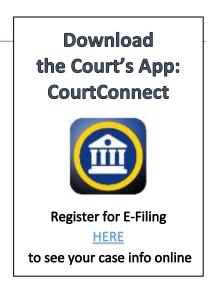
CUYAHOGA COUNTY COURT OF COMMON PLEAS DIVISION OF DOMESTIC RELATIONS

LEGAL SEPARATION CHECKLIST

If you have questions, Call the Help Center at (216) 443-8880

Documents Needed For Filing:

- □ Case Designation Sheet
- □ Instructions for Service
- □ Complaint for Legal Separation
- □ Affidavit of Military Service (must be notarized)
- □ Filing Fee: \$200.00 (without children)



How to File: <u>E-Filing</u>, Mail or Drop-Off

PLEASE READ THE ENTIRE NOTICE MAILED TO YOU FOLLOW THE INSTRUCTIONS ON THE NOTICE

WHAT TO DO AFTER YOU FILE:

- ➤ All: Check online docket for completion of service. If service is UNCLAIMED or REFUSED, then call the Help Center for further assistance.
- If your case is UNCONTESTED, you must CALL to the Help Center 2 weeks before your final hearing to have your Final Judgment Entry Pre-Approved.

THIS FORM MUST ACCOMPANY ALL NEW DOMESTIC **RELATIONS FILINGS**

PLEASE TYPE

COURT OF COMMON PLEAS CUYAHOGA COUNTY DIVISION OF DOMESTIC RELATIONS CASE DESIGNATION FORM

Case No. Judge

Please list any Pending, closed or previously filed and dismissed Domestic Relations' Case(s) between the parties, list case number and judge:

I certify that to the best of my knowledge the within case is not related to any now pending or previously filed, except as noted above.

ANNULMENT (1830)	DOMESTIC VIOLENCE (1850)
APPLICATION TO ESTABLISH FAMILY CASE (1895)	DATING VIOLENCE (1851)
APPLICATION TO ADOPT ADMINISTRATIVE ORDER (1897)	LEGAL SEPARATION - CHILDREN (1821)
DISSOLUTION - CHILDREN (1840)	LEGAL SEPARATION - NO CHILDREN (1822)
DISSOLUTION - NO CHILDREN (1841)	UCCJEA - PARENTING REGISTRATION (1890)
DIVORCE - CHILDREN (1810)	UIFSA - PATERNITY ESTABLISHMENT (1561)
DIVORCE - NO CHILDRÈN (1811)	UIFSA - SUPPORT ESTABLISHMENT (1563)
	UIFSA - SUPPORT REGISTRATION (1562)

Service:	Certified Mail	Waiver	Personal	Publication	FedEx

Plaintiff's Length of Residence In: Cuyahoga County Ohio

PARTY 1		PARTY 2			
FULL NAME:			FULL NAME:		
ALIAS NAME:			ALIAS NAME:		
DATE OF BIRTH:			DATE OF BIRTH:		
NUMBER OF THIS MARRIAGE:			NUMBER OF THIS MARRIAGE:		
ADDRESS:			ADDRESS:		
CITY:	STATE:	ZIP:	CITY:	STATE:	ZIP:
HOME PHONE:	CELL PHONE:		HOME PHONE:	CELL PHONE:	
EMAIL:			EMAIL:		

DATE OF MARRIAGE:	PLACE OF MARRIAG	GE:		
CHILDREN'S NAMES:	М	F	DATE OF BIRTH:	AGE

Attorney of Record (Print or Type)	Address:	
Signature	City:	State: Zip:
Ohio Supreme Court Registration Number	Office Phone	
Email Address	Cell Phone	
Witness:	Address:	
(CO	URT USE ONLY)	
SET FOR HEARING / /	DATE OF FINAL JOURNAL ENTRY	

MISCELLANEOUS NOTES:



CUYAHOGA COUNTY COURT OF COMMON PLEAS DIVISION OF DOMESTIC RELATIONS

THE STATE OF OHIO Cuyahoga County

IN THE COURT OF COMMON PLEAS INSTRUCTIONS FOR SERVICE

Case No. DR _____

Judge _____

Method of Service

CERTIFIED MAIL

PERSONAL (Please specify type)

CUYAHOGA COUNTY SHERIFF

v.

OUT OF COUNTY SHERIFF_____

PROCESS SERVER_____

ORDINARY MAIL

REGISTERED MAIL

RESIDENCE (Please specify type)

CUYAHOGA COUNTY SHERIFF

OUT OF COUNTY SHERIFF_____

PROCESS SERVER _____

Name and Address of Party to Serve:

Name:

Street Address:

City/State/Zip:

Filing Party/ Attorney of Record

COURT OF COMMON PLEAS DIVISION OF DOMESTIC RELATIONS CUYAHOGA COUNTY, OHIO

	: CASE NO
PLAINTIFF	
ADDRESS	
CITY, STATE, ZIP CODE	:
NUMBER OF THIS MARRIAGE	:
VS	: JUDGE
	:
DEFENDANT	: COMPLAINT FOR LEGAL SEPARATION
ADDRESS	. COMPLAINTFOR LEGAL SEPARATION
CITY, STATE, ZIP CODE	:
NUMBER OF THIS MARRIAGE	:
3. There is/arechild(ren) born is/are as follows:	, in,, as issue of this marriage, whose name(s) and date(s) of birth) (DOB) (DOB
(DOB) (DOB
and the wife \Box is \Box is not pregnant.	
4. Plaintiff seeks legal seperation on the fol	llowing ground(s):
 Plaintiff and Defendant have lived so for at least one year. Plaintiff and Defendant are incompa Defendant has been guilty of the foll 	

5. Plaintiff and Defendant:	 do not own any real property own real property located at:
6. Plaintiff and Defendant have	acquired certain personal property during the marriage. This property has been divided. The following property has not been divided
7. Plaintiff and Defendant	have no debts have the following debts:
	ndant is an active duty service member of the United States Military. dant is an active duty service member of the United States Military.
WHEREFORE , Plaintiff asks t he/she be granted the following relief:	hat he/she be granted a legal separation from the Defendant, and that
	responsibilities or Shared parenting
Child support including medical	support;
Spousal support;	
	ocated at;
An equitable division of persona	
Restoration of maiden name	
	elief as the Court finds fair, just and equitable, including that the cost of this
action be paid by Defendant.	
	y and that the court conduct any uncontested trial via live two-way video laintiff also asks that any corroborating witness be allowed to participate
remotely.	Respectfully Submitted,
	PLAINTIFF
	SIGNATURE
	ADDRESS
	CITY, STATE, ZIP CODE
	MOBILE TELEPHONE NUMBER

EMAIL ADDRESS

WAIVER OF LEGAL COUNSEL

I understand that I have the right to be represented by an attorney in this proceeding. I have decided not to have an attorney assist me. By signing this Waiver, I confirm that I am waiving my right to legal representation for the purpose of this legal action.

I am aware that my spouse's attorney, if my spouse is represented by an attorney, does not represent me, or my interests.

I am aware that I could hire an attorney to advise and/or represent me but I am choosing to proceed without counsel.

I am freely and voluntarily choosing to sign the documents associated with this legal action with a full understanding of these documents and that I am choosing to proceed without counsel.

This waiver is being made voluntarily, with my full understanding and the same is of my own free will. It is my decision to proceed without counsel.

Date

PLAINTIFF (print name)

SIGNATURE