

PROBATE COURT OF WAYNE COUNTY, OHIO

CONSERVATORSHIP OF: \_\_\_\_\_

CASE NO. \_\_\_\_\_

APPLICATION FOR APPOINTMENT OF CONSERVATOR

(R.C. 2111.021)

I, \_\_\_\_\_, Petitioner/Conservatee, hereby state that I am a competent adult, but am physically infirm. I request that::

1. Name of Proposed Conservator \_\_\_\_\_
Street \_\_\_\_\_
City \_\_\_\_\_, Ohio Zip \_\_\_\_\_ Telephone (\_\_\_\_)\_\_\_\_\_

be appointed conservator of my:

- Person and Estate Person Only Estate Only

2. The length (time period) of the conservatorship is:
Indefinite Definite - to \_\_\_\_\_, 20\_\_\_\_\_.

3. If "Person Only" or "Person and Estate" is checked, I give the following power over my PERSON to the:

a. Conservator:
All powers that a guardian would have under the guardianship laws of Ohio.
Limited to power to \_\_\_\_\_

b. Court:
All powers that a Court would have under the guardianship laws of Ohio.
Limited to the power to \_\_\_\_\_

4. (If "Estate Only" or "Person and Estate" is checked), I give the following power over my ESTATE to the:

a. Conservator:
All powers that a guardian would have under the guardianship laws of Ohio.
Limited to the power to \_\_\_\_\_

b. Court:
All powers that a Court would have under the guardianship laws of Ohio.
Limited to the power to \_\_\_\_\_

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c. The following of my property is subject to the foregoing powers:

- All property. (*Attach description of property*).
- Only the property listed as follows:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

5. If the Application is for a conservatorship of the estate:

a. The estate to be placed under conservatorship is:

Personal Property	\$	_____
Real Property	\$	_____
Annual Rents	\$	_____
Other Annual Income	\$	_____
<b>TOTAL</b>		<b>\$</b> _____

6. Service of notice of the conservatorship is to be given to:

- None
- Same as Guardianship
- As Listed on Form 15.0

Based on the foregoing information, I do hereby petition the Court to appoint a Conservator for myself, and do so freely and of my own will. I certify that all information and statements contained in this application and the attached exhibits are correct to the best of my knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Typed or Printed Attorney's Name

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

( ) \_\_\_\_\_

\_\_\_\_\_  
Telephone Number (Include Area Code)

\_\_\_\_\_  
Supreme Court Registration Number

\_\_\_\_\_  
Petitioner/Conservatee's Signature

\_\_\_\_\_  
Typed or Printed Name of Petitioner/Conservatee

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

( ) \_\_\_\_\_

\_\_\_\_\_  
Telephone Number (Include Area Code)