

PROBATE COURT OF WAYNE COUNTY, OHIO
LATECIA E. WILES, JUDGE

IN THE MATTER OF THE 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: _____
2. Address of Proposed Conservator:

Street	City	State	Zip	Telephone
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be appointed conservator of my: Person and Estate Person Only Estate Only

3. The length (time period) of the conservatorship is:
 Indefinite Definite _____, 20__ to _____, 20__.

4. 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 power to:
1. _____
 2. _____
 3. _____
 4. _____

b. Court All powers that a guardian would have under the guardianship laws of Ohio.

- Limited power to:
1. _____
 2. _____
 3. _____
 4. _____

5. 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 power to:
1. _____
2. _____
3. _____
4. _____
- b. Court All powers that a guardian would have under the guardianship laws of Ohio.
 Limited power to:
1. _____
2. _____
3. _____
4. _____
- c. The following of my property is subject to the foregoing powers:
 All property (*Attach description of property*).
 Only the property listed as follows:
1. _____
2. _____
3. _____
4. _____

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

The estate to be placed under conservatorship is:

Personal Property \$ _____
Real Property \$ _____
Annual Rents \$ _____
Other Annual Income \$ _____

TOTAL \$ _____

7. 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 me, 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

Petitioner/Conservatee's Signature

Typed or Printed Attorney's Name

Printed Name of Petitioner/Conservatee

Street

Street

City State Zip

City State Zip

Telephone Number (Include Area Code)

Telephone Number (Include Area Code)

Supreme Court Registration Number