

PROBATE COURT OF SUMMIT 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 _____

