## COURT OF COMMON PLEAS SANDUSKY COUNTY, OHIO PROBATE DIVISION

| <b>EMERGENCY GUARDIANSHIP OF</b> |  |
|----------------------------------|--|
|                                  |  |
| CASE NO.                         |  |
|                                  |  |
|                                  |  |

## APPLICATION FOR APPOINTMENT OF EMERGENCY GUARDIAN OF ALLEGED INCOMPETENT [O.R.C. 2111.03]

| TYPE OF EMERGENCY GUARDIANSHIP APPLIED FOR IS: [check the applicable boxes]   |  |  |
|---|--|--|
| Name of Prospective Ward  |  |  |
| Address of Prospective Ward   |  |  |
| Prospective Ward's Date of Birth  |  |  |
| Applicant's relationship to the incompetent is  |  |  |
| ☐ Applicant represents that the applicant is not an administrator, executor or other fiduciary of the estate wherein the alleged incompetent is interested.   |  |  |
| The Applicant  has has not been charged with or convicted of a crime involving theft, physical violence, or sexual, alcohol or substance abuse except as follows (if applicable, state date and place of each charge or each conviction): |  |  |
|   |  |  |
| Applicant further represents that an Emergency Guardian of the incompetent is necessary in order that the $\square$ ward's property may be taken proper care of and asks that a guardian be appointed.                                    |  |  |
| Applicant offers the attached bond in the amount of \$  |  |  |
| The time period requested is definite to  |  |  |

| oplicant represents to the Court that resides or legal settlement in Sandusky County, Ohio and that the ward is incompetent by reason of O. 11.01(D) | R.C  |
|--|------|
| The Applicant represents that a guardian has been nominated in writing pursuant to ORC 1337.09   | )(D) |
| ORC 2111.121. The nominated person is  |      |
| The nominated person's information is listed on Form 15.0L (Next of Kin).  |      |
| A Statement of Expert Evaluation is attached. (Form 17.1)  |      |
| A list of Next of Kin of Ward is also attached. (Form 15.0)  |      |
| The whole estate of the ward is estimated as follows:  |      |
| Personal Property \$   |      |
| Real Estate \$   |      |
| Annual Rents \$  |      |
| Other annual income \$   |      |
| The Applicant represents the Proposed Ward had military service.   |      |
| Military I.D   |      |
| Branch of Service  |      |
| Dates of Service   |      |
|  |      |
| torney for Applicant Applicant   |      |
| inted Name / Registration No. Printed Name   |      |
| ldress Address   |      |
| none Phone   |      |

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