

IN THE COURT OF COMMON PLEAS

Division
COUNTY, OHIO

Name : Case No.
Street Address :
City, State and Zip Code : Judge
Petitioner :
and : Magistrate
Name :
Street Address :
City, State and Zip Code :
Petitioner :

Instructions: This form is used to request ending the marriage when the parties have agreed on all aspects of the termination, including the division of real estate, personal property, debts, spousal support, and, if there is/are (a) child(ren), allocation of parental rights and responsibilities (custody), parenting time (companionship and visitation) and child support. A Separation Agreement (Uniform Domestic Relations Form 16) and either a Shared Parenting Plan (Uniform Domestic Relations Form 17) or a Parenting Plan (Uniform Domestic Relations Form 18), if applicable, must be filed with this Petition.

PETITION FOR DISSOLUTION OF MARRIAGE AND
WAIVER OF SERVICE OF SUMMONS WITH CHILDREN WITHOUT CHILDREN

The Petitioners, Husband, (name) and
Wife, (name), say as follows:

- 1. The Husband Wife Both parties has/have been (a) resident(s) of the State of Ohio for at least six months.
2. The Husband Wife Both parties has/have been (a) resident(s) of County for at least 90 days immediately before the filing of this Petition.
3. The Petitioners were married to one another on (date of marriage) in (city or county, and state).

4. Check all that apply:

- The Wife is not pregnant.
- The Wife is pregnant and the approximate due date is \_\_\_\_\_ .
- No children were born from or adopted during this marriage or relationship.
- All children born from or adopted during this marriage or relationship are adults and not mentally or physically disabled child(ren) incapable of supporting or maintaining themselves.
- The Petitioners are the parents of \_\_\_\_\_ (number) child(ren) born from or adopted during this marriage or relationship. Of the child(ren), \_\_\_\_\_ (number) is/are emancipated adult(s) and not under any disability. The following \_\_\_\_\_ (number) of child(ren) is/are minor child(ren) and/or mentally or physically disabled and incapable of supporting or maintaining themselves (name and date of birth of each child):

Name of Child	Date of Birth
_____	_____
_____	_____
_____	_____

Husband is not the biological father of the following child(ren) who was/were born during the marriage (name and date of birth of each child): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5.  The following child(ren) of this marriage or relationship is/are subject to a custody or parenting order in a different Court proceeding (name of each child and the Court that issued the custody or parenting order): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6.  The Petitioners have entered into a Separation Agreement which is attached. If Petitioners have (a) minor child(ren) (select one):

- The Petitioners have agreed to a Parenting Plan which is attached.
- The Petitioners have agreed to a Shared Parenting Plan which is attached.

7. The Petitioners further say as follows:

- We are both over 18 years of age.
- We are not under any legal disability.
- We waive all rights to receive summons for the dissolution action through the Clerk of Courts.
- We have read this Petition and voluntarily ask this Court to dissolve the marriage.

8.  The Petitioner \_\_\_\_\_ requests to be restored to the former name of: \_\_\_\_\_

The Petitioners request the Court for a Decree of Dissolution of their marriage pursuant to the terms of the Separation Agreement and the Shared Parenting Plan or Parenting Plan, if there is/are (a) child(ren).

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Your Signature (Husband)

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Your Signature (Wife)

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Telephone number at which the Court may reach you or at which messages may be left for you

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