

**PROBATE COURT OF GREENE COUNTY, OHIO**  
**THOMAS M. O'DIAM, JUDGE**

**CONSERVATORSHIP OF** \_\_\_\_\_

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

**APPLICATION FOR APPOINTMENT OF CONSERVATOR**  
[R.C. 2111.021]

I, \_\_\_\_\_, Petitioner, state that I am a competent adult, but I am physically infirm. I petition the Court to appoint a Conservator on my behalf pursuant to R.C. §2111.021.

1. Name of proposed Conservator: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

2. Type of Conservatorship requested is:

- Person and estate       Estate only       Person only

3. The length of time of the conservatorship is:

- Indefinite       Definite to \_\_\_\_\_, 20\_\_\_\_

4. If **“person only”** or **“person and estate”** above are checked, I give the following power over my person to the Conservator:

- All powers that a guardian would have under the guardianship laws of the State of Ohio.  
 The following limited powers:

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

5. If **“estate only”** or **“person and estate”** are checked, I give the following power over my estate to the Conservator:

- All powers that a guardian would have under the guardianship laws of the State of Ohio.  
 The following limited powers:

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

6. These powers apply to the following property:

All property that I own, real and personal.

The following specific property:

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

7. If the application for conservatorship is of the "estate only" or "person and estate," the type and estimated value of the assets involved is:

Personal Property .....	\$ _____
Real Estate .....	\$ _____
Annual Rent .....	\$ _____
Other Annual Income .....	\$ _____
Total	\$ _____

8. The proposed Conservator offers bond in the amount of \$\_\_\_\_\_.

9. Service of Notice of the conservatorship is to be given to:

None                       The same as guardianship under the guardianship laws of the State of Ohio

Based on the foregoing information, I 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 is correct to the best of my knowledge and belief.

\_\_\_\_\_  
Attorney for Petitioner

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

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

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

\_\_\_\_\_  
Telephone Number (include area code)

\_\_\_\_\_  
Telephone Number (include area code)

\_\_\_\_\_  
Attorney Registration No.

\_\_\_\_\_  
Email