

## **Packet L – Third Party Legal Custody**

1. INSTRUCTION 4 – Instructions Filing for Legal Custody
2. Affidavit 3 – PARENTING PROCEEDING AFFIDAVIT
3. Local Form 128 – Complaint for Legal Custody
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5. Local Form 127 – New Case Designation Form (Legal Custody)



**Summit County  
Domestic Relations Court**

Administrative Judge Katarina Cook  
Judge Kani H. Hightower

**INSTRUCTIONS**  
**FILING FOR LEGAL CUSTODY**

**1. ARE YOU IN THE RIGHT COURT?**

Before filling out the Complaint for Legal Custody and paying the filing fee, first determine if you are in the right court:

- A. If you are a GRANDPARENT and the minor child is currently living with you, the Summit County Juvenile Court's website [www.juvenilecourt.summitoh.net](http://www.juvenilecourt.summitoh.net) provides instructions for completing and filing a Caretaker Authorization Affidavit (when you can't locate one or both parents) or a Grandparent Power of Attorney (completed by the parent when temporarily unable to care for the minor child).
- B. If the minor child has been found to be dependent, abused or neglected in a prior or current case filed by Summit County Children Services Board ("CSB") or any other county's child welfare agency, this Court cannot hear the case. Go to Summit County Juvenile Court to file.
- C. If the minor child has a pending delinquency case in a juvenile court, go to Summit County Juvenile Court to file.
- D. If you want to apply for guardianship of a minor child and have consent of the biological parents, go to Summit County Probate Court and file for guardianship.
- E. If the minor child is nearing the age of 18 and has a developmental disability, see the Help Desk at the Summit County Probate Court for further guidance.
- F. If none of the above apply, then follow the instructions below.

**General Information**

The information provided below does not constitute legal advice.

The Court strongly encourages parties to consult with an attorney.

- If you have retained an attorney or intend to, the Court will only communicate with your attorney.

**2. Options to Consult with an Attorney:**

- **The Akron Bar Association's (ABA) Lawyer Referral Service** can match you with an attorney. You will receive up to a 30-minute consultation with an attorney for a non-refundable \$30 fee. For more information about ABA's Lawyer Referral Service, please visit their website at <https://www.akronbar.org/?pg=LRS> or call (330) 253-5038.

- If your case involves domestic violence, you may be eligible to receive legal assistance from **Community Legal Aid**. Call (330) 535-4191.
- You may be eligible through **Community Legal Aid** for a free or reduced fee attorney. Visit <https://www.communitylegalaid.org/> or call (330) 535-4191.
- **Attend a Justice Bus** event held quarterly here in Summit County for free legal advice and connecting with other community agencies: Follow us on social media (Facebook Summit County Domestic Relations Court) for dates and locations.

**3. If you decide to represent yourself (which is called proceeding *pro se*):**

- Visit Ohio Legal Help’s website at <https://www.ohiolegalhelp.org/> for guidance in preparing your documents.
- Attend a Justice Bus event held quarterly and hosted by the Court held in various locations in Summit County where volunteer attorneys offer free legal advice.
- Also, “Ask an Attorney” is a community outreach program offered by the Akron Bar Association. Members of the community may call to receive free answers to brief legal questions. The program is scheduled on the 2<sup>nd</sup> and 4<sup>th</sup> Fridays of the month from 9:00 a.m. to 11:00 a.m. Call (330) 253-5007 for more information.
- **The primary way the Court will communicate with you is via email.** Please provide the Clerk of Courts with your email address and check your email regularly. Keep in mind, if you are representing yourself, you will be held to the same standard as an attorney and are responsible for completing the necessary paperwork, and ensuring that you and your necessary witnesses appear at court for your hearing.

## **FILING A COMPLAINT FOR LEGAL CUSTODY**

1. If this is a new case, you will be filing a Complaint for Legal Custody. If there has been a prior custody case regarding the child(ren), you must inform the Clerk and file a *Motion for Change of Custody*, [Form 27](#).
2. For a NEW case, the following forms need to be completely filled out and filed:

[Local Form 127](#) - *Legal Custody Case Designation Form*

[Local Form 128](#) - *Complaint for Legal Custody*

[Affidavit 3](#) - *Parenting Proceeding Affidavit Form* and

[Form 31](#) - *Service Request*

3. All parties which would include Mother and Father of child and any person currently designated as legal custodian must be served (notified) regarding the Complaint for Legal Custody. Complete addresses must be included on the Service Request Form.
4. For further instructions on obtaining proper service, see [Instruction 9](#) for In-State Service or [Instruction 10](#) for Out-of-State Service located on this Court's website at [drcourt.org](http://drcourt.org). The hearing may not go forward unless the parties have received proper notice. You will be notified of your hearing by mail.
5. If a parent cannot be located, a service by publication must be completed. The fee for publication cannot be waived.
6. **If you cannot afford the filing fee**, you may file a [Local Form 124](#) -*Motion to Proceed In Forma Pauperis and Financial Disclosure/Affidavit of Indigency*, asking the Court to proceed without paying the initial deposit for the filing fees at the time of filing.
  - Filing a *Motion to Proceed In Forma Pauperis* does **not** mean that your filing and other fees will be free, it means you do not have to pay the initial deposit. If the motion is granted, you will be placed on a payment plan at a rate of \$25/month.
  - Please see [Instruction 12](#) for Filing a Motion to Proceed *In Forma Pauperis*.
7. If you are requesting **Temporary Custody** be granted to you at the initial hearing, you will also need to complete and file a *Motion for Temporary Custody* – [Local Form 129](#).
8. Immediately upon your filing of the required documents, you will obtain an Initial Hearing date. To do so, use the phone provided at the Clerk of Courts and you will call/be connected to the court schedulers who will provide you with the hearing date.

# IN THE COURT OF COMMON PLEAS

DIVISION

COUNTY, OHIO

Plaintiff/Petitioner 1

Case No.

Judge

vs./and

Magistrate

Defendant/Petitioner 2/Respondent

**Instructions:** Check local court rules to determine when this form must be filed. By law, this affidavit must be filed and served with any Complaint, Petition or Motion regarding the allocation of parental rights and responsibilities, parenting time, custody, or visitation. Each party has a continuing duty while this case is pending to inform the Court of any parenting proceeding concerning the child(ren) in any other court in this or any other state. **If more space is needed, add additional pages.**

## PARENTING PROCEEDING AFFIDAVIT (R.C. 3127.23(A))

Affidavit of

(Print Name)

**ONLY CHECK THE FOLLOWING BOX IF YOU BELIEVE THAT THE HEALTH, SAFETY, OR LIBERTY OF YOURSELF OR YOUR CHILD(REN) WOULD BE JEOPARDIZED BY THE DISCLOSURE OF YOUR ADDRESS OR IDENTIFYING INFORMATION. YOU ACKNOWLEDGE THAT THE COURT MAY CONDUCT A HEARING REGARDING THE BASIS FOR YOUR REQUEST.**

☐ Pursuant to R.C. 3127.23(D), I allege that my health, safety, or liberty or that of my child(ren) would be jeopardized by the disclosure of identifying information to my spouse or the public. Therefore, I request that my address be placed under seal. I have marked the corresponding box next to each address I am requesting to be sealed.

**1. (Number): \_\_\_\_\_ Minor child(ren) is/are subject to this case as follows:**

Insert the information requested below for all minor or dependent children of the parties. You must list the residences for all places where the children have lived for the last **FIVE** years.

<b>a. Child's name</b>		<b>Place of birth</b>	<b>Date of birth</b>	<b>Sex</b> <input type="checkbox"/> M <input type="checkbox"/> F
_____		_____	_____	
<b>Date of residence</b>	<b>Address Confidential</b>	<b>Person child lived with (name and address)</b>		<b>Relationship</b>
_____ to present	<input type="checkbox"/>	_____ _____		_____
_____ to _____	<input type="checkbox"/>	_____ _____		_____

_____ to _____	<input type="checkbox"/>	_____ _____ _____	_____
_____ to _____	<input type="checkbox"/>	_____ _____ _____	_____

<b>b. Child's name</b> _____	<b>Place of birth</b> _____	<b>Date of birth</b> _____	<b>Sex</b> <input type="checkbox"/> M <input type="checkbox"/> F
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☐ Check this box if the information below is the same as in Section 1(a). Skip to the next question.

Date of residence	Address Confidential	Person child lived with (name and address)	Relationship
_____ to present	<input type="checkbox"/>	_____ _____ _____	_____
_____ to _____	<input type="checkbox"/>	_____ _____ _____	_____
_____ to _____	<input type="checkbox"/>	_____ _____ _____	_____
_____ to _____	<input type="checkbox"/>	_____ _____ _____	_____

<b>c. Child's name</b> _____	<b>Place of birth</b> _____	<b>Date of birth</b> _____	<b>Sex</b> <input type="checkbox"/> M <input type="checkbox"/> F
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☐ Check this box if the information below is the same as in Section 1(a). Skip to the next question.

Date of residence	Address Confidential	Person child lived with (name and address)	Relationship
_____ to present	<input type="checkbox"/>	_____ _____ _____	_____
_____ to _____	<input type="checkbox"/>	_____ _____ _____	_____
_____ to _____	<input type="checkbox"/>	_____ _____ _____	_____
_____ to _____	<input type="checkbox"/>	_____ _____ _____	_____

d. Additional children are listed on Attachment 1(d). (Provide requested information for additional children on an attachment labeled 1(d).)

2. **Participation in custody case(s): (Check only one box)**

- ☐ I **HAVE NOT** participated as a party, witness, or in any capacity in any other case, in this or any other state, concerning the custody of or visitation (parenting time), with any child subject to this case.
- ☐ I **HAVE** participated as a party, witness, or in any capacity in any other case, in this or any other state, concerning the custody of or visitation (parenting time), with any child subject to this case.

*Explain:* \_\_\_\_\_

- a. Name of each child: \_\_\_\_\_
- b. Type of case: \_\_\_\_\_
- c. Court and State: \_\_\_\_\_
- d. Date and court order or judgment (if any): \_\_\_\_\_

3. **Information about custody case(s): (Check only one box)**

- ☐ I **HAVE NO INFORMATION** of any cases that could affect the current case, including any cases relating to custody; domestic violence or protection orders; dependency, neglect, or abuse allegations; or adoptions concerning any child subject to this case.
- ☐ I **HAVE THE FOLLOWING INFORMATION** concerning cases that could affect the current case, including any cases relating to custody; domestic violence or protection orders; dependency, neglect, or abuse allegations; or adoptions concerning a child subject to this case, other than listed in Paragraph 2.

*Explain:* \_\_\_\_\_

- a. Name of each child: \_\_\_\_\_
- b. Type of case: \_\_\_\_\_
- c. Court and State: \_\_\_\_\_
- d. Date and court order or judgment (if any): \_\_\_\_\_

4. **Information about criminal convictions:**

List all of the criminal convictions, including guilty pleas, for you and the members of your household for the following offenses: any criminal offense involving acts that resulted in a child being abused or neglected; any domestic violence offense that is a violation of R.C. 2919.25; any sexually oriented offense as defined in R.C. 2950.01; and any offense involving a victim who was a family or household member at the time of the offense and caused physical harm to the victim during the commission of the offense.

NAME	CASE NUMBER	COURT/COUNTY/STATE	CHARGE

5. **Persons not a party to this case: (Check only one box)**

- ☐ I **DO NOT KNOW OF ANY PERSON** not a party to this case who has physical custody **or** claims to have custody or visitation rights with respect to any child subject to this case.
- ☐ I **KNOW THAT THE FOLLOWING NAMED PERSON(S)** not a party to this case has/have physical custody or claim(s) to have custody or visitation rights with respect to any child subject to this case.

- a. Name/Address of Person: \_\_\_\_\_  
☐ has physical custody ☐ claims custody rights ☐ claims visitation rights  
 Name of each child: \_\_\_\_\_
- b. Name/Address of Person: \_\_\_\_\_  
☐ has physical custody ☐ claims custody rights ☐ claims visitation rights  
 Name of each child: \_\_\_\_\_
- c. Name/Address of Person: \_\_\_\_\_  
☐ has physical custody ☐ claims custody rights ☐ claims visitation rights  
 Name of each child: \_\_\_\_\_

**6. I understand that I have a continuing duty to advise this Court of any custody, visitation, parenting time, divorce, dissolution of marriage, separation, neglect, abuse, dependency, guardianship, parentage, termination of parental rights, or protection order from domestic violence case concerning the children about whom information is obtained during this case.**

**OATH OR AFFIRMATION**

*(Do not sign until Notary Public is present)*

I, (print name) \_\_\_\_\_, swear or affirm that I have read this Affidavit and, to the best of my knowledge and belief, the facts and information stated in this Affidavit are true, accurate, and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

\_\_\_\_\_  
 Your Signature

STATE OF \_\_\_\_\_ )  
 ) SS  
 COUNTY OF \_\_\_\_\_ )

Sworn to or affirmed before me by \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
 Signature of Notary Public

\_\_\_\_\_  
 Printed Name of Notary Public

Commission Expiration Date: \_\_\_\_\_

(Affix seal here)



IN THE COURT OF COMMON PLEAS  
DOMESTIC RELATIONS DIVISION  
SUMMIT COUNTY, OHIO

_____	)	CASE NO. _____
<b>Proposed Legal Custodian(s)</b>	)	
Address _____	)	SETS NO. _____
_____	)	
Phone _____	)	JUDGE _____
Email _____	)	
	)	MAGISTRATE _____
	)	
<b>PETITIONER(S)</b>	)	
<b>-vs-</b>	)	
	)	
_____	)	
<b>Mother</b>	)	
Address _____	)	
_____	)	
Phone _____	)	
Email _____	)	
<b>and</b>	)	
	)	
_____	)	
<b>Father</b>	)	
Address _____	)	
_____	)	
Phone _____	)	
Email _____	)	
<b>and</b>	)	
	)	
_____	)	
<b>Current Custodian if not parent</b>	)	
Address _____	)	
_____	)	
Phone _____	)	
Email _____	)	
	)	
<b>RESPONDENT(S)</b>	)	

**COMPLAINT FOR LEGAL CUSTODY**

## COMPLAINT FOR LEGAL CUSTODY

Now comes Petitioner(s) \_\_\_\_\_,

As \_\_\_\_\_ (relationship) to the following minor child(ren)

Name \_\_\_\_\_ (date of birth) \_\_\_\_\_

Name \_\_\_\_\_ (date of birth) \_\_\_\_\_

Name \_\_\_\_\_ (date of birth) \_\_\_\_\_

And allege(s) the following:

1. The child(ren) is(are) in the legal custody of \_\_\_\_\_.

The child(ren) now live(s) with \_\_\_\_\_ at the following address:

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

and has(have) lived there since \_\_\_\_\_.

The child(ren): (check one)

- ☐ a. Was(were) involved in another court that issued orders about the child(ren)'s custody, visitation and/or support of the child(ren) in \_\_\_\_\_ Court in the State of \_\_\_\_\_ and the case number is \_\_\_\_\_.
- ☐ b. Is not a ward of another court pursuant to R.C. §2151.23(A)(2).
- ☐ c. Summit County Children Services or another county's child welfare agency is currently involved / investigating.

2. The Mother of the child(ren) is \_\_\_\_\_.

She lives at: \_\_\_\_\_  
\_\_\_\_\_

3. Paternity-who the biological father of the child(ren) is: (check one)

- ☐ a. Paternity HAS been established through (check one):
  - ☐ i. Genetic testing;
  - ☐ ii. An Acknowledgement of Paternity signed by the parents;
  - ☐ iii. Court Order;
  - ☐ iv. Presumption due to the parents' marriage at the child(ren)'s birth.

The Father of the child(ren) is \_\_\_\_\_.

He lives at: \_\_\_\_\_  
\_\_\_\_\_

☐ b. If Paternity has NOT been established (check all that apply):

☐ The Alleged Father of the child(ren) is: \_\_\_\_\_.  
He lives at \_\_\_\_\_.

☐ The Father of the child(ren) is unknown to Mother.

☐ The Father is unknown to the Petitioner.

4. The Parents:

☐ a. Are unsuitable because (check all that apply)

☐ i. They have abandoned the child(ren);

☐ ii. They have contractually relinquished the child(ren);

☐ iii. They are totally unable to provide care or support; or

☐ iv. Remaining in the custody of the Parents would be detrimental  
to the child(ren).

v. Please describe the circumstances supporting unsuitability:

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

☐ b. I believe that the parent(s) AGREE to the transfer of legal custody of the child(ren) without a finding of unsuitability.

☐ Yes ☐ No

5. It is in the best interest of the child(ren) to be placed in the legal custody of Petitioner(s) because:

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

The Petitioner(s) respectfully request(s) that the Court grant legal custody of the child(ren) to Petitioner(s) and make a determination of residual parental rights and responsibilities including but not limited to visitation and child(ren) support.

Respectfully submitted,

---

**Petitioner Signature**

---

Printed Name

---

**Petitioner Signature**

---

Printed Name

---

**Mother Signature**

---

Printed Name

---

**Father Signature**

---

Printed Name

---

**Current Custodian if Not Parent**

---

Printed Name

---

**Current Custodian if Not Parent**

---

Printed Name



**Summit County Court of Common Pleas  
Domestic Relations Division  
SERVICE REQUEST**

**Instructions:** Complete the following form and file with the Summit County Clerk of Courts – Domestic Relations Division, located at: 205 South High Street, 1<sup>st</sup> Floor, Akron OH 44308. For further instruction, go to Website: [www.drcourt.org](http://www.drcourt.org)

**Case Caption:**

**Case Number**

\_\_\_\_\_  
Plaintiff / Petitioner 1 / Petitioner

vs.

\_\_\_\_\_  
Defendant / Petitioner 2 / Respondent

**To Clerk:** You are hereby requested to make service upon the following by:

- ☐ FedEx [preferred over Certified Mail] \*
- ☐ Certified Mail \*
- ☐ Regular Mail [only after FedEx/Certified fails for being unclaimed or refused]\*
- ☐ Sheriff Service
- ☐ Personal Service by Process Server \_\_\_\_\_
- ☐ E-Mail for Child Support Enforcement Agency (CSEA) only

\* If FedEx/Certified returns as insufficient address, vacant, unable to forward or unknown, you must attempt to Find a new address and start service over; if you are unable to find a new address, you must file an affidavit and request for publication/posting with the Clerks.

**Please Serve:** Indicate below what you would like served, e.g., Complaint for Divorce.  
(If you would like service on a previously filed document, include the name of the document and the date it was filed).

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

**Please check the box of the person(s) whom you are requesting to be served (notified):**

☐ Plaintiff / Petitioner 1 / Petitioner

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

☐ Defendant / Petitioner 2 / Respondent

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

☐ Additional Party: \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

☐ Additional Party: \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_  
Attorney or Self-Represented Filer  
(if attorney, include your Supreme Ct. #)

\_\_\_\_\_  
Supreme Ct. #

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

**SUMMIT COUNTY COURT OF COMMON PLEAS  
DOMESTIC RELATIONS DIVISION**

**New Case Designation Form  
LEGAL CUSTODY**

Case No.: \_\_\_\_\_

Sets No.: \_\_\_\_\_

**INSTRUCTIONS:** Pursuant to the Summit County Court of Common Pleas-Domestic Relations Division order filed on March 1, 2007, this form must be completed and submitted with any new cause of action filed with the Summit County Clerk of Courts. **You must include an email address for court correspondence.**

**Previous Domestic Relations Case?** ☐ Yes ☐ No

*Previous Case Number:* \_\_\_\_\_

*Previous Judge:* \_\_\_\_\_

Proposed Legal Custodian(s) - Petitioners(s)	Attorney for Petitioners
First Name: _____ MI: _____ Last Name: _____ Suffix: _____ Address: _____ City: _____ State: _____ Zip: _____ DOB: _____ Telephone #: _____ Email (REQUIRED): _____	First Name: _____ MI: _____ Last Name: _____ Suffix: _____ Address: _____ City: _____ State: _____ Zip: _____ DOB: _____ Telephone #: _____ Email (REQUIRED): _____
Mother	Attorney for Mother
First Name: _____ MI: _____ Last Name: _____ Suffix: _____ Address: _____ City: _____ State: _____ Zip: _____ DOB: _____ Telephone #: _____ Email (REQUIRED): _____	First Name: _____ MI: _____ Last Name: _____ Suffix: _____ Address: _____ City: _____ State: _____ Zip: _____ Telephone #: _____ Email (REQUIRED): _____
Father	Attorney for Father
First Name: _____ MI: _____ Last Name: _____ Suffix: _____ Address: _____ City: _____ State: _____ Zip: _____ DOB: _____ Telephone #: _____ Email (REQUIRED): _____	First Name: _____ MI: _____ Last Name: _____ Suffix: _____ Address: _____ City: _____ State: _____ Zip: _____ Telephone #: _____ Email (REQUIRED): _____

Current Custodian if not Parent	Attorney for Current Custodian
First Name: _____ MI: _____	First Name: _____ MI: _____
Last Name: _____ Suffix: _____	Last Name: _____ Suffix: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
DOB: _____ Telephone #: _____	Telephone #: _____
Email (REQUIRED): _____	Email (REQUIRED): _____

Child Information	
1 <sup>st</sup> Child Name: _____	DOB: _____
Address: _____	CITY: _____ STATE: _____ ZIP: _____
2 <sup>nd</sup> Child Name: _____	DOB: _____
Address: _____	CITY: _____ STATE: _____ ZIP: _____
3 <sup>rd</sup> Child Name: _____	DOB: _____
Address: _____	CITY: _____ STATE: _____ ZIP: _____
4 <sup>th</sup> Child Name: _____	DOB: _____
Address: _____	CITY: _____ STATE: _____ ZIP: _____