# _____ – 2018

**CITY OF CLEVELAND HEIGHTS**
**40 Severance Circle, Cleveland Heights Ohio 44118**

# DECLARATION OF DOMESTIC PARTNERSHIP

**The undersigned hereby declare, under penalty of perjury, the following to be true at the time of signing this form:**

1. We share a common residence as defined in Chapter 181 of the Cleveland Heights Codified Ordinances.
2. We agree to be in a relationship of mutual interdependence as defined in Chapter 181 of the Cleveland Heights Codified Ordinances.
3. Neither of us is married to a third individual or a member of a civil union or domestic partnership with a third individual.
4. Each of us is 18 years of age or older.
5. We are not related by blood in a way that would prevent us from being married to one another in this state.
6. We agree to file a Declaration of Domestic Partnership with the City.
7. We understand that no individual who has previously filed a Declaration of Domestic Partnership in this city may file a new Declaration of Domestic Partnership until at least 90 days after the date that a Notice of Termination of Domestic Partnership was filed with the City under this Ordinance (unless one of the Domestic Partners has died).
8. Our common residence and mailing address is:

_____

Street Address City State Zip

_____

Phone

| **Domestic Partner** | **Domestic Partner** |
|---|---|
| _____ | _____ |
| Signature | Signature |
| _____ | _____ |
| Print Name | Print Name |

STATE OF OHIO )
) ss:
COUNTY OF CUYAHOGA )

Before me, a Notary Public in and for said county, personally appeared _____ and _____, who acknowledged that they did sign the aforesaid instrument and the same is their free act and deed.

In testimony whereof, I have hereunto set my hand and official seal at Cleveland Heights, Ohio this _____ day of _____, 2018.

_____

Notary Public

– This document will be kept on file at the City of Cleveland Heights, Ohio. –