_____ – 2019

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

_____

Signature

_____

Print Name

Domestic Partner

_____

Signature

_____

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 _____, 2019.

_____

Notary Public

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