



The undersigned hereby declare, under penalty of perjury, the following to be true at the time of signing this form:
That they share with the adult co-applicant a government-issued marriage license not recognized by the State of Ohio, or
that they meet all of the following eligibility requirements as set forth below:

1. The two must live together; and
2. The two must agree to be jointly responsible for each other's basic living expenses; and
3. Neither person may be married or a member of another domestic partnership; and
4. The two must not be related in a way which would prevent them from being married to each other; and
5. Both must be over eighteen (18) years of age; and
6. Neither party has had a different domestic partner in the previous six months (this requirement does not apply if the partner died).

Our common residence and mailing address is

Street Address

City, State, Zip Code

Contact phone number

(Do not sign until in front of a Notary Public)

Domestic Partner 1

Print Name

Date of Birth

Signature

Email

STATE OF _____

COUNTY OF _____

Before me, a Notary Public in and for said county,
personally appeared _____
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 _____,
this _____ day of _____, 20_____.

Notary Public Signature

Notary Public Name

My Commission Expires: _____

Domestic Partner 2

Print Name

Date of Birth

Signature

Email

STATE OF _____

COUNTY OF _____

Before me, a Notary Public in and for said county,
personally appeared _____
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 _____,
this _____ day of _____, 20_____.

(This space reserved for seal)