## PROBATE COURT OF FRANKLIN COUNTY, OHIO JEFFREY D. MACKEY, JUDGE

IN THE MATTER OF \_\_\_\_\_

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

## AFFIDAVIT OF INTELLECTUAL DISABILITY

[R.C.5123.71]

The State of Ohio, Franklin County, s.s.

the undersigned, residing at			
	says that they have information or actual		
knowledge t	o believe that the respondent is a person with an intellectual disability who resides or is institutionalized		
at	, Franklin County, Ohio, and that the person is subject		
involuntary	institutionalization by court order, pursuant to R.C. 5123.71 as defined by R.C. 5123.01(N)(O). This		
allegation is	that the above respondent is a:		
pers	son with an intellectual disability subject to institutionalization by court order" who is a on age eighteen or older, is at a moderate level of intellectual disability and, because of disability, the following condition(s) exist:		
	(1) The person represents a very substantial of physical impairment or injury to himself as manifested by evidence that he is unable to provide for and is not providing for his most basic physical needs and that provision for such needs is not available in the community;		
	(2) The person needs and is susceptible to significant habilitation in an institution.		
	affiant provides the following factual grounds for the belief that the respondent is subject to zation by court order		

Attached hereto is either a comprehensive evaluation report including a statement by the evaluation team that they have performed a comprehensive examination of the person and that they are of the opinion that the person has an intellectual disability and is subject to institutionalization by court order, or a written and sworn statement that the person or that the guardian of a minor or adjudicated incompetent person has refused to allow a comprehensive evaluation.

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The name and address of respondent's legal guardian, if any, is:					
The identification of the	e adult next of kin of the respondent	follows:			
NAME	ADDRESS	KINSHIP	AGE		
That the following const	titutes additional information that may	be necessary for the purpose of det	ermining residence:		
Dated this	day of	., 20			
	_				
		Affiant			
Sworn to before me an	d signed in my presence on the day	and year above dated.			

Notary Public/Deputy Clerk

## WAIVER

I, the undersigned affiant, hereby waive the issuing and service of Notice of the Hearing on this Affidavit, and voluntarily enter my appearance herein.

Date

Affiant