# GENERAL INFORMATION REGARDING FILING FOR A MODIFICATION OF CUSTODY OR VISITATION ORDER MADE BY THIS COURT IN CASES WHERE CHILDREN'S SERVICES IS INVOLVED

- All information on the attached forms must be completed in full.
- You may type, print, or clearly write in ink the information on the forms.
- If you are not a party (mother, father and current custodian are examples of parties to a case), you must complete the Motion to Intervene which is included in this packet.
- YOUR PAPERWORK CAN NOT BE PROCESSED IF WE DO NOT HAVE COMPLETE AND CURRENT ADDRESSES FOR ALL PARTIES.
- The paperwork can be completed on-line or you can obtain it in person and turn in at the window or you may take it with you and return it by mail or drop off.
- If you send the paperwork by mail, your signatures <u>must</u> be notarized. The mailing address is:

Clermont County Juvenile Court
Attention: Brittany
2340 Clermont Center Drive, Suite 100
Batavia, Ohio 45103-1958

- Once your paperwork has been processed, you will be notified by mail of the date and time of your hearing. If your hearing notice is returned marked "undeliverable as addressed" and you have not notified the Court of your new address, in writing, the complaint/motion may be dismissed without further action.
- If the hearing notice which has been sent to the other party is returned to the Court marked "undeliverable as addressed," you will be contacted by the Court for a new address. It is your responsibility to provide a good address in writing to the Court as soon as possible. If you fail to provide a good address, and the complaint/motion has not been served at the time of hearing and the other party does not appear at the hearing, the complaint/motion may be dismissed without further action.

• The staff at Juvenile Court is <u>not</u> permitted to give you legal advice. Examples of legal advice are:

What should I do?
What are my rights?
What will the Magistrate or Judge do?
Can I take the child from the other parent?

If you want legal advice, you must contact an attorney. If you need help in finding an attorney, you may contact the Lawyer Referral Service at (513) 732-2050.

If you have questions as you are completing the packet, please contact:

Brittany at (513) 732-7467 Fax Number – (513) 732-7695

In the Matter of:  Minor child		Case No.	
		MOTION TO INTERVENE	
	Now comesespectfully moves the Court to intesents that intervention is in the bes	ervene as a party in the within action. Movant st interest of the minor child.	
Mova	nt states as follows:		
1.		the child (for example, grandparent, step grandparent, ). Movant's relationship is as follows:	
2.		d with you at any time during the past 12 months.  never lived with movant or □ child lived with movant to	
3.	Movant represents that day to day care of the child $\square$ was $\square$ was not provided by movant at any time in the last twelve (12) months. Day to day care provided consisted of the following:		
4.	Movant further states the following	ing reasons why intervention should be granted:	
	Wherefore, movant requests the within action.	Court grant the motion to intervene as a party in the	
		Respectfully submitted by:	
		Attorney or Self-Represented Party Signature	
		Printed Name	
		Address	
		City, State and Zip	
		Telephone Number	
		Fax Number	
		Email address	
		Supreme Court Reg. No. of Attorney	

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

IN RE:	
Minor Child	MOTION
Now comes	
	ionship to child(ren)) and requests that the Court issue an Order for the following:
	Modification of Custody – Please explain modification requested
	Modification of Visitation – Please explain modification requested
	Other_
for the follow	ing reasons:
	AFFIDAVIT
motion are tru	oner, having been duly sworn, deposes and says that the allegations in the foregoing ie. As evidenced by my signature below, I hereby authorize the Court to perform a check Registry of Abuse, Neglect and dependency and a criminal background check.
	Petitioner
Subsc	For Court Use Only ribed and duly sworn to before me according to law, by the above named Petitioner, this day of, 20, County of Clermont, State of Ohio.
	Notary Public/Deputy Clerk

Revised June 2021

IN THE MATTER OF:	
A Minor	<u> </u>
	Case No.
Name	
Street Address	
City, State and Zip Code	
Plaintiff	
VS.	
Name	
Street Address	
City, State and Zip Code	
Defendant	
WARNING: This form is not a substitute for the lt is highly recommended that you	_
Instructions: This form is used when you want to req indicate the requested method of service by marking forms to accompany this document. You must chec	uest documents to be served on the other party. You must g the appropriate box. The Court may require additional k the requirements of the county in which you file. YOU F THE ABOVE CONTACT INFORMATION CHANGES.
REQUEST	FOR SERVICE
TO THE CLERK OF COURT:	
Please serve the Summons, Motion to Intervene and the certified mail unless personal service is requested.	e Motion that I have filed upon the individuals set forth below by
☐ Please serve by personal service through	the Sheriff of Clermont County, OH
Other	
Special Instructions to Sheriff:	

### FOLLOWING ADDRESSES ARE MANDATORY Please include apartment numbers, lot numbers, etc.

Plaintiff Name	Defendant Name
Plaintiff Street Address	Defendant Street Address
Plaintiff City, State and Zip	Defendant City, State and Zip
Plaintiff Telephone Number	Defendant Telephone Number
Plaintiff Email Address	Defendant Email Address
	Defendant Place of Employment
Legal Custodian's Name	Defendant Employment Street Address
Legal Custodian's Street Address	Defendant Employment City, State and Zip
Legal Custodian's City, State and Zip	_
Legal Custodian's Telephone Number	-
Email Address	-
	Attorney or Self-Represented Party Signature
	Printed Name
	Address
	City, State and Zip
	Telephone Number
	Fax Number
	Email Address
	Supreme Court Reg. No. of Attorney

#### INFORMATION NEEDED FOR CUSTODY/VISTATION CASES

# FILL OUT ALL INFORMATION COMPLETELY INFORMATION FOR COURT USE ONLY

Your name:	DOB:
Your Street Address:	
Your City, State and Zip	
	ne:Work:
Cell:Ema	il Address:
Your relationship to child:	
Name of child/children:	
DOB of child/children:	
Present Street Address of Child	/Children:
-	hild/Children:
Who does the child currently liv	ve with/relationship:
Natural Mother's name:	DOB:
Street Address:	
City, State and Zip	
Telephone Number: Home:	Work:
Cell:	
Email Address:	
Natural Father's name:	DOB:
SS#:	
Street Address:	
City, State and Zip	
	Work:
Cell:	
Email Address:	
· ·	DOB:
Street Address:	
City, State and Zip	
	Work:
Cell:	
Email Address:	