IN THE DELAWARE MUNICIPAL COURT

APPLICATION FOR SEALING CRIMINAL RECORD PURSUANT TO ORC 2953.32/33

Case Nos. _____
_____
_____

Instructions: You must pay a $100 non-refundable filing fee when submitting this application. Only some criminal convictions are eligible for sealing or expungement. Traffic convictions are not eligible for sealing or expungement. If you apply to seal or expunge a traffic conviction your request will be denied and you will not be refunded your $100 filing fee.

Applicant Information (Must provide all information requested)

Full Name: *Include maiden name if applicable.			
Address:			
City, State and Zip:			
Phone Number:			
Last 4 of Social Security No:	XXX-XX-	**Date of Birth:**	

Please list all convictions, bond forfeitures, or dismissed/acquitted charges that you wish to have sealed?

Offense #1

Case Number _____

Offense Description _____

Ohio Revised Code or City Code section _____

Conviction or dismissal? _____

Date of Conviction or Dismissal _____

Probation discharge date _____

Fines or Court Costs owed? _____

Restitution owed? _____

Did this charge or case involve a victim? _____

Offense #2

Case Number _____

Offense Description _____

Ohio Revised Code or City Code section _____

Conviction or dismissal? _____

Date of Conviction or Dismissal _____

Probation discharge date _____

Fines or Court Costs owed? _____

Restitution owed? _____

Did this charge or case involve a victim? _____

Offense #3

Case Number _____

Offense Description _____

Ohio Revised Code or City Code section _____

Conviction or dismissal? _____

Date of Conviction or Dismissal _____

Probation discharge date _____

Fines or Court Costs owed? _____

Restitution owed? _____

Did this charge or case involve a victim? _____

***If more than three cases or offenses, please use additional forms to complete the application, one for EACH case and charge that you wish to have sealed**

Please answer completely and honestly all questions below:

1. Do you have any convictions, BEFORE those listed above? If yes list the charges, court, and final disposition of each charge and case:

   _____
   _____
   _____
   _____
   _____.

2. Do you have any convictions, AFTER those listed above? If yes list the charges, court, and final disposition of each charge and case:

   _____
   _____
   _____
   _____
   _____.

3. Do you have any cases pending NOW? If yes list the charges, court, and status of each case:

   _____
   _____
   _____
   _____
   _____.

4. Why do you want these records sealed?

   _____
   _____
   _____
   _____
   _____.

Under penalties of perjury and falsification I, _____(Applicant), state that the above information is true and correct to the best of my knowledge and belief.

_____	_____
Applicant's Printed Name	Applicant's Signature / Date
_____	_____
Applicant's Email	Applicant's Phone Number
_____	_____
Attorney's Name	Attorney's Signature / Date
_____	_____
Attorney's Email	Attorney's Phone Number\