

SOUTH EUCLID MUNICIPAL COURT
1349 South Green Road
South Euclid, Ohio 44121
Phone: (216) 381-2880; Fax: (216) 381-1195

APPLICATION TO SEAL RECORD OF DISMISSAL OR NOT GUILTY FINDING
PURSUANT TO O.R.C. 2953.52

I, _____, move this Court for an order to Seal my criminal record pursuant to O.R.C. Section 2953.51 et seq. of the Ohio Revised Code.

I was found not guilty of the charges against me, OR the complaint against me was dismissed, AND there are no criminal proceedings pending against me.

ALSO: (List briefly reasons for requesting that records of not guilty or dismissal finding be sealed.)

NAME: _____

CASE NUMBER: _____

ADDRESS: _____

DATE OF VIOLATION: _____

CITY: _____

DATE OF BIRTH: _____

HOME TELEPHONE: _____

SOCIAL SECURITY #: _____

CELL PHONE: _____

SIGNATURE

DATE

ATTORNEY

DATE

FILING FEE: \$50.00