

**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.)

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NAME: \_\_\_\_\_

CASE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE OF VIOLATION: \_\_\_\_\_

CITY: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

HOME TELEPHONE: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**ATTORNEY**

\_\_\_\_\_  
**DATE**