

STOW MUNICIPAL COURT

Judge Kim R. Hoover
 Judge Lisa L. Coates

4400 Courthouse Drive
 Stow, Ohio 44224
 Tel: 330.564.4199
 Fax: 330.564.4194
 StowMuniCourt.com

APPLICATION TO SEAL COURT RECORDS

NAME:			
	FIRST	M.I.	LAST

SSN:	- -	Date of Birth:	/ /
-------------	-----	-----------------------	-----

ADDRESS:		
	HOUSE # & STREET NAME	CITY
	STATE	ZIP CODE

CONTACT:		
	PHONE NUMBER	EMAIL ADDRESS

CASE(S) TO BE CONSIDERED FOR SEALING

CASE NUMBER(S)	OFFENSE(S)	CONVICTION (X)	DISMISSAL (X)

CONVICTION(S) IN OTHER COURTS (INCLUDING CASES PREVIOUSLY SEALED)

COURT(S) OF CONVICTION(S):	OFFENSE(S):	SEALED? Yes or No

ELIBIGILITY FOR RECORD SEALING

Please review the following list of eligibility requirements and initial next to each statement to affirm that you meet each of these requirements:

1. I have satisfied all requirements imposed by the Court for the cases I am seeking to seal including the payment of all fines and court costs and the completion all probation requirements imposed by the court.

Initial Here: _____

2. **At least one year has elapsed since the final discharge** of the case(s) that I am seeking to seal. The final discharge occurs after the expiration of all court orders. This includes payment of all fines and court costs, all probation requirements have been satisfied, and any orders to obey all laws has expired.

Initial Here: _____

3. I do not have any pending criminal or traffic charges against me in any court.

Initial Here: _____

Briefly state the reason(s) you are seeking to have these records sealed:

Affidavit of Applicant

I acknowledge that I have a duty to supplement and update the information provided here if any changes to my answers occur at any time before a hearing before the Judge.

I swear, under penalties of perjury, that the information I have voluntarily provided herein is true, accurate, and complete to the best of my knowledge and ability.

I UNDERSTAND THAT FAILING TO ANSWER ALL QUESTIONS COMPLETELY AND ACCURATELY OR SUPPLYING FALSE INFORMATION MAY CONSTITUTE A CRIMINAL OFFENSE, INCLUDING BUT NOT LIMITED TO PERJURY.

Signature

Sworn before me this _____ day of _____, _____.

Notary / Deputy Clerk

A copy of this application was served upon the prosecutor(s) for the city/state on _____.

_____, Deputy Clerk