



City of Columbus
Domestic Partnership Registry

City of Columbus # _____
(To be completed by City)

DECLARATION OF DOMESTIC PARTNERSHIP

The undersigned hereby declare, under penalty of perjury, the following to be true at the time of signing this form:

That they share with the adult co-applicant a government-issued marriage license not recognized by the State of Ohio, or that they meet all of the following eligibility requirements as set forth below.

- (1) Are not currently married to another adult as recognized by Ohio law; and
(2) Are not legally separated from another person either under statutory or common law; and
(3) Shares responsibility for each others' common welfare; and
(4) Are at least eighteen (18) years of age and mentally competent to consent to contract; and
(5) Are financially interdependent, as demonstrated by at least four (4) of the following:
a) Joint ownership of real estate property or joint tenancy on a residential lease; or
b) Joint ownership of an automobile; or
c) Joint bank or credit account; or
d) Joint liabilities (e.g., credit cards or loans); or
e) A will designating the interdependent adults as primary beneficiaries; or
f) A retirement plan or life insurance policy beneficiary designation form designating the interdependent adults as primary beneficiaries; or
g) A durable power of attorney signed to the effect that the two interdependent adults have granted powers to one another.

Our common residence and mailing address is

Street Address

City, State, Zip Code

Contact phone number

(Do not sign until in front of a Notary Public)

Domestic Partner 1

Domestic Partner 2

Print Name Date of Birth

Print Name Date of Birth

Signature

Signature

Email

Email

STATE OF _____)
COUNTY OF _____)
Before me, a Notary Public in and for said county, personally appeared _____ who acknowledged that they did sign the aforesaid instrument and the same is their free act and deed. In testimony whereof, I have hereunto set my hand and official seal at _____, _____, 20____.

STATE OF _____)
COUNTY OF _____)
Before me, a Notary Public in and for said county, personally appeared _____ who acknowledged that they did sign the aforesaid instrument and the same is their free act and deed. In testimony whereof, I have hereunto set my hand and official seal at _____, _____, 20____.

Notary Public

Notary Public