

## REQUESTING A RELEASE FROM FORFEITURE

TO BE ELIGIBLE, IF YOU ARE UNDER THE AGE OF 21, YOU MUST HAVE COMPLIED WITH ALL COURT ORDERS AND HAVE PROOF OF PAYMENT IN FULL FOR ALL COURT COSTS AND FINES FOR ALL TRAFFIC CASES.

IF YOU ARE TWENTY-ONE (21) YEARS OF AGE OR OLDER, YOU ARE EXPECTED TO PAY ALL YOUR OUTSTANDING COURT COSTS AND FINES. YOUR CASE CANNOT BE SEALED OR EXPUNGED UNTIL YOU HAVE PAID ALL COURT COSTS AND FINES. ADDITIONALLY, A FAILURE TO PAY YOUR COURT COSTS AND FINES CAN RESULT IN YOUR CASE BEING REFERRED TO A COLLECTION AGENCY.

YOU MAY ASCERTAIN IF YOU HAVE A BALANCE WITH THE COURT BY INQUIRING WITH THE CASHIER'S OFFICE OR THE TRAFFIC DEPARTMENT OF THE JUVENILE COURT LOCATED ON THE SECOND FLOOR OF THE CUYAHOGA COUNTY JUVENILE JUSTICE CENTER, 9300 QUNICY AVENUE, CLEVELAND, OHIO 44106.

YOU WILL RECEIVE ONE OR MORE RECEIPTS WHEN YOU YOU'RE YOUR PAYMENT(S) TO SATISFY ANY OUTSTANDING BALANCES. YOU WILL ALSO RECEIVE A RECEIPT INDICATING THAT YOU HAVE A -0- BALANCE FOR ALL OF YOUR CASES.

YOU MUST FILE A MOTION REQUESTING THE RELEASE OF FORFEITURE. A SAMPLE MOTION IS ATTACHED. THE COURT WILL ISSUE AN ENTRY EITHER GRANTING OR DENYING YOUR REQUEST FOR RELEASE OF FORFEITURE.

THE MOTION MUST BE FILED IN THE JUVENILE COURT CLERK'S OFFICE ON THE SECOND FLOOR OF THE CUYAHOGA COUNTY JUVENILE JUSTICE CENTER LOCATED AT 9300 QUINCY AVENUE, CLEVELAND, OHIO, 44106 ALONG WITH THE \$20 FILING FEE.

THIS IS AN INFORMATION FORM AND IS NOT TO BE ATTACHED TO YOUR MOTION OR FILED WITH THE COURT.

IN THE COURT OF COMMON PLEAS  
JUVENILE DIVISION  
CUYAHOGA COUNTY, OHIO

IN THE MATTER OF:

CASE NO.: \_\_\_\_\_

\_\_\_\_\_  
Print Name

JUDGE: \_\_\_\_\_

MOTION FOR  
RELEASE FROM FORFEITURE

Now comes \_\_\_\_\_, and petitions this Honorable Court for an order for a release from forfeiture. The reasons for this request are fully explained in the attached Affidavit made a part hereof.

Respectfully submitted:

\_\_\_\_\_

Signature

\_\_\_\_\_

Print Name

\_\_\_\_\_

Address

\_\_\_\_\_

City, State and Zip Code

\_\_\_\_\_

Phone number

AFFIDAVIT IN SUPPORT

The affiant \_\_\_\_\_, being duly sworn, deposes and states:

1. My birthdate is \_\_\_\_\_ and I am \_\_\_\_\_ years old.
2. The last four digits of my social security number are\_\_\_\_\_.
3. My driver's license number is \_\_\_\_\_.
4. My license was forfeited on\_\_\_\_\_.
5. I was adjudicated a juvenile traffic offender in case number(s)\_\_\_\_\_.
6. I have completed all court orders including paying all fines and court costs ordered in all of my traffic cases. I have attached the receipts as proof of payment and compliance.

\_\_\_\_\_  
Affiant Signature

\_\_\_\_\_  
Print Name

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public