

## **PRAECIPE FOR FORCIBLE ENTRY AND DETAINER/DAMAGES & CASE DESIGNATION SHEET**

When filing a new eviction you are required to let the court know how you wish the other party served with papers. To do this you must complete a precipe. You may choose any or all types of service. It is up to you to tell us what you want we cannot direct you as to the best type of service. Per Local Court Rule you will also need to file the Case Designation sheet.

1. You are the Plaintiff; they are the defendant
2. Address is where you wish to have the papers served
3. Ordinary mail & posting on the door requires a minimum of 2 copies of all forms plus the original for the court for each adult you are evicting
4. Certified mail requires a copy for the court and a copy for each adult you are evicting
5. Personal and/or residence service requires a copy for the court and a copy for each adult you are evicting
6. Print and Complete the Case Designation Sheet
7. Sign the precipe & Case Designation Sheet

**IN THE FINDLAY MUNICIPAL COURT  
FINDLAY, OHIO**

Plaintiff	:	Case No. _____
	:	
Vs.	:	<b><u>PRAECIPE</u></b>
	:	<b><u>FORCIBLE ENTRY</u></b>
	:	<b><u>AND</u></b>
	:	<b><u>DETAINER/DAMAGES</u></b>
	:	
Defendant	:	

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Defendant's Address

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**VALID SERVICE FOR EVICTION ONLY**

[ ] ORDINARY MAIL AND POSTING ON RESIDENCE DOOR

**VALID SERVICE FOR EVICTION AND/OR DAMAGE CLAIM**

[ ] CERTIFIED MAIL SERVICE

[ ] PERSONAL SERVICE AND/OR RESIDENCE SERVICE

\_\_\_\_\_  
PLAINTIFF/COUNSEL

## **BLANK PRAECIPE**

This form is used when mail has been returned and needs to be reissued.

1. The caption is the same as it appears on the summons
2. Fill in the case number
3. Complete the form – include what papers we are serving, to whom we are serving, where we are serving them, and how you want them to be served
4. Sign the form and file with the court

**PRAECIPE**

The State of Ohio)  
Hancock County ) ss.  
City of Findlay )

In the Findlay Municipal Court of Findlay Ohio

\_\_\_\_\_ : Case No. \_\_\_\_\_  
Plaintiff :  
Vs. :  
: :  
: :  
Defendant :  
\_\_\_\_\_

To the Clerk:  
Please issue \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ in the above entitled case.

\_\_\_\_\_ PLAINTIFF  
Filed \_\_\_\_\_  
Date \_\_\_\_\_

### **PRAECIPE FOR ORDINARY MAIL SERVICE**

This form is used when papers that were issued by certified mail has been returned to us stating “refused” or “unclaimed”.

1. The caption is the same as it appears on the summons
2. Fill in the case number
3. Sign the form and file with the court

**IN THE FINDLAY MUNICIPAL COURT**

Plaintiff	:	Case No. _____
Vs.	:	
	:	
	:	
Defendant	:	<b><u>PRAECIPE FOR</u></b> <b><u>ORDINARY</u></b> <b><u>MAIL SERVICE</u></b>

The undersigned respectfully requests service by ordinary mail, same address or last known address furnished by U.S. post Office, if attempted service by certified mail is returned "Refused" or "Unclaimed".

\_\_\_\_\_  
PLAINTIFF

**FINDLAY MUNICIPAL COURT**

Heather Eigel, Clerk of Court

PO BOX 826

FINDLAY, OHIO 45839

419-424-7143

**CASE DESIGNATION FORM**

(failure to complete this form may delay the processing of your claim)

**Case Number:** \_\_\_\_\_

**1. Has this case been previously filed and dismissed?** Please check one. Yes ( ) No ( )  
If yes, please indicate court, case number and judge. Court \_\_\_\_\_ Case No. \_\_\_\_\_ Judge \_\_\_\_\_

**2. Are there any related cases, pending or closed?** Please check one. Yes ( ) No ( )  
If yes, please indicate court, case number and judge. Court \_\_\_\_\_ Case No. \_\_\_\_\_ Judge \_\_\_\_\_

**PURSUANT TO THE REQUIREMENTS AND SANCTIONS PROVIDED WITHIN RULE 11 OF THE OHIO RULES OF CIVIL PROCEDURE, I HEREBY CERTIFY THE ABOVE TO BE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.**

\_\_\_\_\_  
Signature of Plaintiff or Attorney for Plaintiff

**3. Do you believe that this case can be resolved through Mediation?** Please check one. Yes ( ) No ( )

**Plaintiff** (include complete name, address and phone #)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Defendant** (include complete name, address and phone #)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If more space is necessary for additional parties please use the reverse side of this form)

**CIVIL CATEGORIES PLACE AN (X) IN ONE CATEGORY ONLY**

Accident Auto Damage – CVE	Unpaid Wages/Commission - CVF
Intentional Tort – CVE	Reimbursement – CVF
Personal Injury – CVE	Compensatory/Punitive Damages - CVF
Property Damage – CVE	Unpaid Credit Card Debt - CVF
Account, Money Owed, Nonpayment of Services – CVF	Return of Security Deposit – CVF
Bad Check – CVF	Act for Declaratory Relief - CVF
Breach of Warranty/Contract – CVF	Unpaid Rent/Damages – CVF
Damage Due to Workmanship – CVF	Replevin – CVF, CVH
Default of Loan/Lease – CVF	Small Claims – CVI
Dispute – CVF	Eviction Only - CVG
Unpaid Taxes - CVF	Eviction with Rent/Damage Claim – CVG
Promissory Note – CVF	Other:

**Request for Regular Mail Service**

If service of process by Certified Mail is returned by the Postal Authorities with an endorsement of “REFUSED” OR “UNCLAIMED” the undersigned waives notice of this by the Clerk and requests ordinary mail service in accordance with Civil Rule 4.6(C) or 4.6(D).

\_\_\_\_\_  
Signature of Plaintiff or Attorney for Plaintiff

**Attorney Information**

\_\_\_\_\_  
Attorney of Record (Please print or type)

\_\_\_\_\_  
Ohio Supreme Court Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone Number Fax Number