



CITY OF CLEVELAND  
Mayor Justin M. Bibb

## Instruction Sheet for Domestic Partnership Registry

City of Cleveland  
Division of Assessments and Licenses  
601 Lakeside Avenue, Room 122  
Cleveland, Ohio 44114

Phone: (216) 664-2264

Hours of Operation  
8:00 a.m. to 4:30 p.m. Weekdays

[DALLicenses@clevelandohio.gov](mailto:DALLicenses@clevelandohio.gov)

**Before completing and submitting your application to our office, please read all materials and information included. If you have any questions, please call our office at (216) 664-2264 before you apply.**

A Domestic Partnership is required when two (2) adults of the same or different sex share a common residence and affirm that they share responsibility for each other's common welfare in a non-marital committed relationship.

### **City of Cleveland Codified Ordinance §109.01, Domestic Partnership Registry**

#### **Legal Effect:**

- (a) Registering as domestic partners by two (2) individuals who are also married to one other, in this or in another state, shall under no circumstances, be considered as evidence, knowledge, awareness, or an admission that the partners are not lawfully married and it shall not be given any other legal effect, in this or any other state, with regard to whether the persons are lawfully married.
- (b) Nothing in this chapter shall be interpreted to alter or contravene county, state or federal law.
- (c) Nothing in this chapter shall be construed as recognizing or treating a Declaration of Domestic Partnership as a marriage or a legal status that intends to approximate the design, qualities, significance or effect of marriage.

**City of Cleveland employees may not provide legal advice to the public. The information provided below is for informational purposes only and is not legal advice. For questions regarding the application of a city ordinance or regulation, you should consult an attorney regarding your specific situation.**

### **You May Apply for This License In-Person, Online, or by Mail**

#### **In-Person:**

1. Gather all supporting documentation that must be submitted along with the application. See the *What to Bring or Submit to the Division of Assessments & Licenses* section below.
2. Complete the application in its entirety and sign it. Print legibly using blue or black ink.
3. Visit our office located at the address in the top right-hand corner between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday.
4. Bring the fee listed below. Acceptable forms of payment are money orders, checks, debit/credit cards, and cash.

#### **Online:**

1. Gather all supporting documentation that must be submitted along with the application. See the *What to Bring or Submit to the Division of Assessments & Licenses* section below.
2. Go to <https://ca.permitcleveland.org/public/Default.aspx>, and follow the instructions on Attachment A.
3. Be prepared to submit the license fee listed below plus applicable convenience fees. Acceptable forms of payment are electronic check and debit/credit cards



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**By Mail:**

1. Gather all supporting documentation that must be submitted along with the application. See the *What to Bring or Submit to the Division of Assessments & Licenses* section below.
2. Make copies of all documentation.
3. Complete the enclosed application in its entirety and sign it. Print legibly using blue or black ink.
4. Mail the completed application, supporting documentation, and fee listed below to the Division of Assessments and Licenses at the address listed above in the top right-hand corner. Acceptable forms of payment for mailed applications are money orders and checks. (DO NOT SEND CASH OR CREDIT CARD INFORMATION THROUGH THE MAIL).

**What to Bring or Submit to the Division of Assessments and Licenses**

1. Completed, signed, and notarized application.
2. Fee of \$55.00. All fees are non-refundable.



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# Domestic Partnership Registry Application

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Fee	\$55.00	Date	
File No.	PGDP-		

Together, the undersigned parties hereby affirm and declare, under penalty of perjury, the following to be true:

1. We share a common residence as defined by §109.01 of the Codified Ordinances of the City of Cleveland.
2. We are in a committed relationship and share responsibility for each other's common welfare.
3. Neither party is married to any other individual or a party to a domestic partnership with any other individual.
4. We are 18 years of age or older.
5. We are not related by blood in any way that would otherwise prevent us from being married to one another in this State.
6. We understand that no individual who has previously filed a Declaration of Domestic Partnership in the City of Cleveland may file a new Declaration of Domestic Partnership until a Notice of Termination of Domestic Partnership has been filed with the City pursuant to §109.01 of the Codified Ordinances of the City of Cleveland (except in the case one of the Domestic Partners has died).

### APPLICANTS COMMON RESIDENCE

Address:			
City:	State:	Zip	

### DOMESTIC PARTNER

### DOMESTIC PARTNER

Signature

Signature

Print Name

Print Name

State of Ohio )  
)ss:  
County of Cuyahoga )

Before me, a Notary Public in and for said county, personally appeared \_\_\_\_\_ and \_\_\_\_\_, who acknowledge 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 Cleveland, Ohio this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public