

# THE SUMMIT COUNTY EXPUNGEMENT PROCESS

(Expungement of criminal records)

The following has been provided to assist you with the expungement application process. Every effort is made to keep this information current and up to date. However, keep in mind that changes in legislation may affect the outcome of your expungement request. The laws that are in effect at the time of your expungement application will apply and may supersede any information provided in this document. Although professional public service is offered to assist you in filing an application for expungement of records, employees of the Clerk's Office and employees of the Probation Department **cannot give you legal advice**. Our goal is to help you through the process in an impartial way by delivering excellent service while complying with state legal requirements.

## 1. WHAT IS "EXPUNGEMENT OF RECORDS"?

Expungement of records is to destroy, delete, and erase a record as appropriate for the record's physical or electronic form or characteristic so that the record is permanently irretrievable.

## 2. WHAT IS THE FILING FEE FOR AN EXPUNGEMENT OF RECORD?

For Summit County Court of Common Pleas cases, there is a \$50.00 filing fee for each motion involving a conviction or bail forfeiture. There is no charge for a motion to expunge a dismissal, a not guilty finding, or a No Bill. Cash, checks, money orders, certified checks and credit cards are accepted with proper ID. Checks and money orders shall be made payable to Summit County Clerk of Courts.

Please provide the original **plus** four (4) copies of the Motion to Expunge to the Clerk of Courts for Filing. If you have more than one common pleas case that you are applying to have expunged, you must provide an additional 4 copies for each additional case. Please contact the Clerk of Courts at (330) 643-2211 if you need to know how many additional copies are required. You may obtain copies at the Clerk of Courts File Room located in the basement of the Clerk of Courts Office. The charge for copies is \$0.10 per page.

If you need your Common Pleas Case Number(s), Municipal Case Number(s), charges, or any other case information in order to complete the Motion to Expunge, you may obtain this information by completing a records request with our file room. This may be done either in person at the Clerk of Courts Office File Room (basement level) or on our website at <http://clerkweb.summitoh.net> by clicking Public Records Request. The charge for copies is \$0.10 per page.

If you are mailing your documents to the Clerk of Courts, please include a self-addressed stamped envelope so that we can return a filed copy of your Motion to Expunge for your records. Please mail all documents with payment (if applicable) to: Summit County Clerk of Courts, Attn: Criminal Division, 205 South High Street, Akron, OH 44308.

**\*There are no guarantees that an expungement of record will be granted. Your filing fee is not refundable.**

## 3. WHAT HAPPENS AFTER THE EXPUNGEMENT APPLICATION IS FILED?

After you have filed your expungement application with the Summit County Clerk of Courts Office, you will be contacted by the Summit County Adult Probation Department. It is necessary to complete an interview with the Probation Department before your application will be considered.

The Adult Probation Department must complete a thorough background report for all applicants seeking an expungement of record. It is in your best interest to respond promptly to communication from the Adult Probation Department. Failure to do so can result in delay or even denial of your request.

After your application has been processed by the Adult Probation Department and a report has been completed, your file will be sent to the assignment office to be set for a court date. The Court will communicate with you and/or your attorney either by:

- a) Informing you directly that your expungement request has been approved or denied

**Or**

- b) Sending a notice to appear in court for an expungement hearing

Please note that once an expungement has been granted, your records have been expunged. You will be mailed a certified copy of the Journal Entry expunging your case. It is recommended that you keep this certified copy **indefinitely** because once your case is expunged, access to documents in your file is no longer available. If you would like a copy of any records prior to expungement of record, you may obtain copies from the Summit County Clerk of Courts File Room by completing a records request as indicated above.

**IF YOU HAVE ANY QUESTIONS, OR NEED ASSISTANCE, PLEASE CONTACT THE AKRON LAW EXPUNGEMENT CLINIC AT (330) 972-7751**

**IF YOU WOULD LIKE TO CHECK ON THE STATUS OF YOUR MOTION YOU MAY CONTACT THE ADULT PROBATION DEPARTMENT AT (330) 643-2310**

**IN THE COURT OF COMMON PLEAS  
SUMMIT COUNTY OHIO CRIMINAL DIVISION**

_____	: Common Pleas Case #s	_____
Applicant's Name	:	_____
	:	_____
	:	_____
	:	_____
	:	_____
	:	_____
	:	_____

*Please complete table on next page*

**APPLICATION TO EXPUNGE RECORD OF  
CONVICTION PURSUANT TO O.R.C. 2953**

The Applicant moves the Court to order the expunging of the record of conviction in the following case(s) and all related records pursuant to O.R.C. 2953.

_____	_____
Street Address of Applicant	Name of Attorney (if applicable)
_____	_____
City, State, Zip Code of Applicant	Attorney Registration No. (if applicable)
_____	_____
Social Security Number of Applicant	Street Address of Attorney (if applicable)
_____	_____
Date of Birth of Applicant	City, State, Zip Code of Attorney (if applicable)
_____	_____
Race or Ethnicity of Applicant	Email Address of Attorney (if applicable)
_____	_____
Telephone Number of Applicant	Telephone No. of Attorney (if applicable)
_____	_____
Email of Applicant	Signature of Attorney (if applicable)

Please list all aliases, maiden names, or name changes of the applicant since the age of 18:

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Please list all cities that the applicant has lived in since the age of 18 (including locations of colleges, schools, military assignments, and employment locations):

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Current place of employment of applicant and if unemployed, current source of income:

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Reason for requesting this expungement (employment, housing, education, other):

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*Please complete this table for all cases to be considered for expungement:*

<b>Common Pleas Case Number</b>	<b>Municipal Case Number</b>	<b>Municipal Jurisdiction</b>	<b>Charges</b>	<b>Date of Disposition</b>

I, undersigned, acknowledge the above information is true and correct to the best of my ability and that I have no criminal proceedings against me. I further certify that all applicable expungement requirements under O.R.C. Chapter 2953 are met.

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Signature of Applicant