

IN THE CIRCUIT COURT OF THE
JUDICIAL CIRCUIT IN
AND FOR _____ COUNTY, FLORIDA

CASE NO. _____
DIVISION: _____

IN RE: The Marriage of

_____,
Petitioner/Husband,
and

_____,
Respondent/Wife.

_____/

**PETITION FOR DISSOLUTION OF MARRIAGE
WITH PROPERTY BUT NO DEPENDENT OR MINOR CHILDREN**

I [full legal name] _____,
the [check one only] () Husband () Wife, being sworn, certify
that the following statements are true:

1. JURISDICTION/RESIDENCE. () Husband () Wife () Both
has (have) lived in Florida for at least 6 months before the
filing of this Petition for Dissolution of Marriage.

2. The husband [check one only] () is () is not a member
of the military service.
The wife [check one only] () is () is not a member of the
military service.

3. MARRIAGE HISTORY
Date of Marriage: _____, 20__.
Place of Marriage: [city, state, country] _____,
Date of Separation: _____, 20__.

4. THERE ARE NO MINOR (under 18) OR DEPENDENT CHILD(REN)
COMMON TO BOTH PARTIES AND THE WIFE IS NOT PREGNANT.

5. A completed Notice of Social Security Number, Florida
Family Law Form 12.901(j) is filed with this Petition.

6. This petition for dissolution of marriage should be
granted because:

a. _____ The marriage is irretrievably broken.

b. ____ One of the parties has been adjudged mentally incapacitated for a period of 3 years prior to the filing of this petition. A copy of the Judgment of Incapacity is attached.

SECTION I. MARITAL ASSETS AND LIABILITIES

[check one only]

1. ____ There are no marital assets or debts.

2. ____ There are marital assets or liabilities. All marital and nonmarital assets and liabilities are (or will be) listed in the financial affidavits, Florida Family Law Form 12.901(d) or (e), to be filed in this case.

[check all that apply]

a. ____ All marital assets and liabilities have been divided by a written agreement between the parties, which is attached, to be incorporated into the final judgment of dissolution of marriage. (The parties may use Marital Settlement Agreement for Simplified Dissolution of Marriage, Florida Family Law Form 12.901(h)(2)).

b. ____ The Court should determine how the assets and liabilities of this marriage are to be distributed, under section 61.075, Florida Statutes.

c. ____ Petitioner should be awarded an interest in Respondent's property because: _____

SECTION II. SPOUSAL SUPPORT (ALIMONY)

[check one only]

1. ____ Petitioner forever gives up his/her right to spousal support (alimony) from Respondent.

2. ____ Petitioner requests that the Court order Respondent to pay the following spousal support (alimony) and claims that he or she has a need for the support that he or she is requesting and Respondent has the ability to pay that support. Spousal support (alimony) is requested in the amount of \$ _____ every () week () other week () month, beginning [date] _____, and continuing until [date or event] _____.

Explain why the Court should order Respondent to pay and any specific request(s) for type of alimony (temporary, permanent, rehabilitative, and/or lump sum: _____

[check if applies] () Petitioner requests life insurance on Respondent's life, provided by Respondent, to secure such support.

SECTION III. OTHER

1. [If Petitioner is also the Wife, check one only]
() yes () no. Petitioner/Wife wants to be known by her former name, which was [full legal name] _____

_____.

2. Other relief [specify]: _____

SECTION IV. PETITIONER'S REQUEST (This section summarizes what you are asking the Court to include in the final judgment of dissolution of marriage.)

Petitioner requests that the Court enter an order dissolving the marriage and [check all that apply]

1. ___ distributing marital assets and liabilities as requested in Section I of this Petition.

2. ___ awarding spousal support (alimony) as requested in Section II of this Petition.

3. ___ restoring Wife's former name as requested in Section III of this Petition.

6. ___ awarding other relief as requested in Section III of this Petition.

and any other terms the Court deems necessary.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this petition and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

DATED: _____

Signature of Petitioner

Printed name _____

Address _____

City State Zip

Telephone (area code and
number)

Telefax (area code and
number)

STATE OF FLORIDA

COUNTY OF _____

Sworn to or affirmed before me on the _____ day of _____ 20____
by _____.

Notary Public, State of
Florida

[Print, type or stamp
commissioned name of
notary]

Check one:

_____ Personally known

_____ Produced identification

Type of identification
produced _____