INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.913(b), AFFIDAVIT OF DILIGENT SEARCH AND INQUIRY (11/12)

When should this form be used?

This form is to be used with **Notice of Action for Dissolution of Marriage (No Child or Financial Support)**, Florida Supreme Court Approved Family Law Form 12.913(a)(1) and **Notice of Action For Family Cases With Minor Child(ren)**, Form 12.913(a)(2), to obtain **constructive service** (also called service by publication).

The other party is entitled to actual notice of the proceedings when possible. When it is necessary to use constructive notice, it must be given in a way that is likely to provide actual notice. You must disclose the last known address of the other party. A last known address cannot be unknown. This form includes a checklist of places you can look for information on the location of the other party. While you do not have to look in all of these places, the court must believe that you have made a very serious effort to get information about the other party's location and that you have followed up on any information you received.

This form should be typed or printed in black ink. After completing this form, you should sign the form before a <u>notary public</u> or <u>deputy clerk</u>. You should <u>file</u> the original and a **Notice of Action for Dissolution of Marriage (No Child or Financial Support)**, Florida Supreme Court Approved Family Law Form 12.913(a)(1), or **Notice of Action For Family Cases With Minor Child(ren)**, Form 12.913(a)(2), with the <u>clerk of the circuit court</u> in the county where your petition is filed. You should keep a copy for your records.

Where can I look for more information?

Before proceeding, you should read "General Information for Self-Represented Litigants" found at the beginning of these forms. For further information, see rule 12.070, Florida Family Law Rules of Procedure and chapter 49, Florida Statutes.

Special notes...

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

		JUDICIAL CIRCUIT,		
	IN AND FOR	COUNTY, FLORIDA		
		Case No.:		
		Division:		
	Petitioner,			
	and			
	Respondent.			
	AFFIDAVIT OF DILIC	ENT SEARCH AND INQUIRY		
	ATTIONVIT OF DIEIG	ENT SEARCH AND INQUIRE		
		, being sworn,		
	certify that the following information is	true:		
1.	I have made diligent search and inquiry to discover the name and current residence of Respondent: {Specify details of search} Refer to checklist below and identify all actions taken (any additional information included such as the date the action was taken and the person with whom you spoke is helpful) (attach additional sheet if necessary): [Check all that apply] United States Post Office inquiry through Freedom of Information Act for current address or any			
_	relocations. Last known employmentof Respondent, also ask for any addresses to which W-2	including name and address of employer. You should Forms were mailed, and, if a pension or profit-sharing hich any pension or plan payment is and/or has been		
		ve worked or that governed his or her particular trade or		
	Regulatory agencies, including professio	nal or occupational licensing.		
_	Names and addresses of relatives and co Respondent's last known address. You a Respondent may have moved. Relatives	ontacts with those relatives, and inquiry as to are to follow up any leads of any addresses where include, but are not limited to: parents, brothers, ephews, grandparents, great-grandparents, former in-		
	Information about the Respondent's posteath.	ssible death and, if dead, the date and location of the		
<u> </u>	Telephone listings in the last known local Internet at http://www.switchboard.com indicate if a public library assisted you in	n or other Internet databank locator service. Please		
_	Highway Patrol records in the state of Re Department of Motor Vehicle records in	espondent's last known address. the state of Respondent's last known address.		

	Department of Correctio	ns records in the state of Respond	dent's last known addre	ess.		
	Title IV-D (child support	enforcement) agency records in th	ne state of Respondent	's last known		
	address.					
	Hospitals in the last know	vn area of Respondent's residence	e.			
	Utility companies, which	include water, sewer, cable TV, a	nd electric, in the last k	nown area of		
	Respondent's residence.					
	Letters to the Armed For	ces of the U.S. and their response	as to whether or not t	here is any		
		ndent. (See Memorandum for Ce				
	•	d Family Law Form 12.912(a).)	•	•		
		ollector's Office in the area where	Respondent last resid	ed.		
			•			
2.	The age of Respondent is	[Choose only one] () known <i>{e</i>	nter agel or ()	unknown		
۷.	The age of Respondent is	() known (c	mer age; or ()	dikilowii.		
3.	Respondent's current re	sidence				
٦.	[Choose only one]]	·				
	• • • • • • • • • • • • • • • • • • • •	's current residence is unknown t	o mo			
		's current residence is in some sta		an Elorida		
	bkespondent	s current residence is in some sta	ate of country other the	ali Fioriua.		
	c. The Respon	dent, having residence in Florida,	has been absent from	Elorida for more		
		or to the date of this affidavit, or o				
		I personally upon him or her, and		•		
			·			
	state upon whon	n service of process would bind th	iis absent or concealed	kespondent.		
4	Deemandent/e leet line	un adduses as of (data)				
4.	Respondent's last know	n address as or {aate}		, was:		
	Address	n address as of {date} City Fax No	State	Zıp		
	Telephone No	Fax No	·			
		employment, as of {date}		, was		
	Name of Employer					
		City				
	Telephone No	Fax No				

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit 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 Number:
	Fax Number:
	E-mail Address(es):
STATE OF FLORIDA COUNTY OF	
Sworn to or affirmed and signed before me on	by
	NOTARY PUBLIC or DEPUTY CLERK
	[Print, type, or stamp commissioned name of notary or clerk.]
Personally known	, -
Produced identification	
Type of identification produced	
IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, [fill in all blanks]	HE/SHE MUST FILL IN THE BLANKS BELOW:
This form was prepared for: {choose only one } () Pe	etitioner () Respondent
This form was completed with the assistance of:	
{name of individual}	
{name of business}	<i>_</i>
{address}	,
{city},{state}	, {telephone number}