



INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM  
12.981(a)(4),  
STEPPARENT ADOPTION: AFFIDAVIT OF DILIGENT SEARCH

**When should this form be used?**

Use this form to obtain **constructive service** (also called service by publication) in a proceeding for stepparent adoption, **Joint Petition for Adoption by Stepparent**,  Florida Supreme Court Approved Family Law Form 12.981(b)(1), when any required consent is unavailable because the address or location of the person whose consent is required is not known and cannot be determined.


This form includes a checklist of places you must look for information on the location of the person whose rights you seek to terminate. You do have to look in all of these places, and the court must believe that you have made a very serious effort to get information about the person's location and that you have followed up on any information you received. Section 63.054, Florida Statutes, requires that in each adoption a search of Florida's Putative Father Registry must be conducted. You will need an order from the judge to do this, which you can request by filing a **Motion for Search of the Putative Father Registry**,  Florida Supreme Court Approved Family Law Form 12.981(a)(6).

This form should be typed or printed in black ink. After completing this form, you should **file** the original with the **clerk of the circuit court** in the county where your **petition** was filed and 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 Rule 1.070, Florida Rules of Civil Procedure.

**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 a **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.

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

IN THE MATTER OF THE ADOPTION OF

\_\_\_\_\_,  
Adoptee(s).

**PETITION FOR STEPPARENT ADOPTION: AFFIDAVIT OF DILIGENT SEARCH**

I, *{full legal name}* \_\_\_\_\_, being sworn, certify that the following information is true:

1. I am the child(ren)'s ( ) mother ( ) father.
2. The last known address of the child(ren)'s other parent *{name}* \_\_\_\_\_, as of *{date}* \_\_\_\_\_, was:

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

\_\_\_\_\_  
Telephone No. Fax No.

His/her last known employment, as of *{date}* \_\_\_\_\_, was:

\_\_\_\_\_  
Name of Employer

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

\_\_\_\_\_  
Telephone No. Fax No.

3. The other parent is over the age of 18.
4. The other parent's current residence is not known and cannot be determined, although I have made a diligent search and inquiry to locate him/her through the following:  
**You must search ALL of the following sources of information and state the results.**  
\_\_\_\_ United States Post Office inquiry through the Freedom of Information Act for the person's current address or any previous address.  
Result of search: \_\_\_\_\_  
\_\_\_\_ Last known employment of the other parent, including name and address of employer. Result of search: \_\_\_\_\_  
\_\_\_\_ Regulatory agencies, including professional or occupational licensing, in the area where the other parent last resided. Result of search: \_\_\_\_\_  
\_\_\_\_ Names and addresses of relatives to the extent such can be reasonably obtained from the petitioner or other sources, contacts with those relatives and inquiry as to the other parent's last known address. You are to follow up any leads of any addresses where the other parent may have moved. Result of search: \_\_\_\_\_  
\_\_\_\_ Information about the other parent's possible death and, if dead, the date and location.

- \_\_\_ Telephone listings in the area where the other parent last resided.  
Result of search: \_\_\_\_\_
- \_\_\_ Law enforcement agencies in the area where the other parent last resided.  
Result of search: \_\_\_\_\_
- \_\_\_ Highway Patrol records in the state where the other parent last resided.  
Result of search: \_\_\_\_\_
- \_\_\_ Department of Corrections records in the state where the other parent last resided.  
Result of search: \_\_\_\_\_
- \_\_\_ Hospitals in the last known area of the other parent's residence.  
Result of search: \_\_\_\_\_
- \_\_\_ Records of utility companies, which include water, sewer, cable TV, and electric in the last known area of the other parent's residence.  
Result of search: \_\_\_\_\_
- \_\_\_ Records of the Armed Forces of the U.S. and their response as to whether or not there is any information about the other parent. (See Florida Supreme Court Approved Family Law Form 12.912(a), Memorandum for Certificate of Military Service.)  
Result of search: \_\_\_\_\_
- \_\_\_ Records of the tax assessor's and tax collector's office in the area where the other parent last resided.  
Result of search: \_\_\_\_\_
- \_\_\_ Search of one Internet databank locator service.  
Result of search: \_\_\_\_\_
- \_\_\_ Title IV-D (child support enforcement) agency records in the state of the other parent's last known address. Result of search: \_\_\_\_\_

✓ if applies:

\_\_\_ A search of the Putative Father Registry maintained by the Office of Vital Statistics of the Department of Health has been requested, and if granted, the certificate from the State Registrar will be filed in this action.

**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: \_\_\_\_\_

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  
deputy clerk.]

\_\_\_\_ Personally known

\_\_\_\_ Produced identification

Type of identification produced \_\_\_\_\_

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE  
BLANKS BELOW:** [ ✍ fill in **all** blanks]

I, *{full legal name and trade name of nonlawyer}* \_\_\_\_\_,  
a nonlawyer, located at *{street}* \_\_\_\_\_, *{city}* \_\_\_\_\_,  
*{state}* \_\_\_\_\_, *{phone}* \_\_\_\_\_, helped *{name}* \_\_\_\_\_,  
who is the petitioner, fill out this form.