

<b>TEMPORARY PROTECTION FROM ABUSE ORDER</b> <input type="checkbox"/> Amended Order <input type="checkbox"/> Continued Order	IN THE COURT OF COMMON PLEAS OF <u>DELAWARE</u> COUNTY, PENNSYLVANIA NO. _____
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**PLAINTIFF**

First	Middle	Last
		Plaintiff's DOB

Name(s) of All protected persons, including minor child/ren and DOB:

\_\_\_\_\_

\_\_\_\_\_

V.

**DEFENDANT**

First	Middle	Last	Suffix

Defendant's Address:

\_\_\_\_\_

\_\_\_\_\_

DEFENDANT IDENTIFIERS			
DOB		HEIGHT	
SEX		WEIGHT	
RACE		EYES	
HAIR			
SSN			
DRIVERS LICENSE #			
EXP DATE		STATE	

**CAUTION:**

- Weapon Involved
- Weapon Present on the Property
- Weapon Ordered Relinquished

The Court Hereby Finds: That it has jurisdiction over the parties and subject matter, and the Defendant will be provided with reasonable notice and opportunity to be heard.

**The Court Hereby Orders:**

- Defendant shall not abuse, harass, stalk or threaten any of the above persons in any place where they might be found.
- Except for such contact with the minor child/ren as may be permitted under paragraph 5 of this order, Defendant shall not contact Plaintiff, or any other person protected under this order, by telephone or by any other means, including through third persons.
- Additional findings of this order are set forth below.

Order Effective Date \_\_\_\_\_ Order Expiration Date \_\_\_\_\_

**NOTICE TO THE DEFENDANT**

Defendant is hereby notified that violation of this order may result in arrest for indirect criminal contempt, which is punishable by a fine of up to \$1,000 and/or up to six months in jail. 23 Pa.C.S.A. § 6114. Consent of Plaintiff to Defendant's return to the residence shall not invalidate this order, which can only be changed or modified through the filing of appropriate court papers for that purpose. 23 Pa.C.S.A. § 6108 (g). If Defendant is required to relinquish any firearms, other weapons or ammunition or any firearm license, those items must be relinquished to the sheriff within 24 hours of the service of this order. As an alternative, Defendant may relinquish any firearm, other weapon or ammunition listed herein to a third party provided Defendant and the third party first comply with all requirements to obtain a safekeeping permit. If, due to their current location, firearms, other weapons or ammunition cannot reasonably be retrieved within the time for relinquishment, Defendant shall provide an affidavit to the sheriff listing the firearms, other weapons or ammunition and their current location no later than 24 hours after the service of this order. Defendant is further notified that violation of this order may subject him/her to state charges and penalties under the Pennsylvania Crimes Code and to federal charges and penalties under the Violence Against Women Act, 18 U.S.C. §§ 2261-2262.

AND NOW, on \_\_\_\_\_ upon consideration of the attached Petition for Protection From Abuse the court hereby enters the following Temporary Order:

- Plaintiff's request for a Temporary Protection Order is denied.
- Plaintiff's request for a Temporary Protection Order is granted.

1. Defendant shall not abuse, harass, stalk or threaten any of the above persons in any place where they might be found.

2. Defendant shall be evicted and excluded from the residence at: \_\_\_\_\_

(NONCONFIDENTIAL ADDRESS FROM WHICH DEFENDANT IS EXCLUDED) or any other permanent or temporary residence where Plaintiff or any other person protected under this order may live. Plaintiff is granted exclusive possession of the residence. Defendant shall have no right or privilege to enter or be present on the premises of Plaintiff or any other person protected under this order.

3. Except for such contact with the minor child/ren as may be permitted under paragraph 5 of this order, Defendant is prohibited from having ANY CONTACT with Plaintiff, or any other person protected under this order, either directly or indirectly, at any location, including but not limited to any contact at Plaintiff's or other protected party's school, business, or place of employment. Defendant is specifically ordered to stay away from the following locations for the duration of this order:

\_\_\_\_\_

4. Except for such contact with the minor child/ren as may be permitted under paragraph 5 of this order, Defendant shall not contact Plaintiff, or any other person protected under this order, by telephone or by any other means, including through third persons.

5. CUSTODY

There is a custody order as to the child/ren of the parties:

\_\_\_\_\_  
(Enter the county court and docket number.)

THIS ORDER SHALL NOT SUPERSEDE THE CURRENT CUSTODY ORDER.

THIS ORDER SUPERSEDES ANY PRIOR ORDER RELATING TO CHILD CUSTODY.

Until the final hearing, all contact between Defendant and the child/ren shall be limited to the following:

\_\_\_\_\_  
 Pending the outcome of the final hearing in this matter, Plaintiff is awarded temporary custody of the following minor child/ren:

\_\_\_\_\_

The local law enforcement agency and the sheriff in the jurisdiction where the child/ren are located shall ensure that the child/ren are placed in the care and control of the Plaintiff in accordance with the terms of this order.

6. FIREARMS, OTHER WEAPONS AND AMMUNITION RESTRICTIONS

(Check all that apply.)

Defendant is prohibited from possessing, transferring or acquiring any firearms for the duration of this order.

Defendant shall relinquish to the sheriff the following firearms licenses owned or possessed by Defendant.

\_\_\_\_\_

Defendant is directed to relinquish to the sheriff any firearm, other weapon or ammunition listed in

\_\_\_\_\_  
Plaintiff

: IN THE COURT OF COMMON PLEAS  
: OF Delaware COUNTY,  
: PENNSYLVANIA

v.

\_\_\_\_\_  
Defendant

: No.

**ATTACHMENT A TO \_\_\_\_\_ ORDER  
FIREARMS, OTHER WEAPONS AND AMMUNITION INVENTORY**

It is hereby ordered that Defendant relinquish the following firearms, other weapons, and ammunition to the sheriff:

Firearm/Other Weapon/Ammunition	Location
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

All firearms, other weapons and ammunition owned or possessed by Defendant.

Additional Notes: \_\_\_\_\_

BY THE COURT

Judge \_\_\_\_\_ Date: \_\_\_\_\_

NOTICE: This attachment will be withheld from public inspection in accordance with 23 Pa. C.S.A. §6108 (a)(7)(v).

Attachment A to Temporary Order, which is incorporated herein by references.

Defendant may relinquish any firearms, other weapons or ammunition to the sheriff. As an alternative, Defendant may relinquish firearms, other weapons and ammunition to a third party provided Defendant and the third party first comply with all the requirements to obtain a safekeeping permit. Defendant must relinquish any firearm, other weapon, ammunition or firearms license ordered to be relinquished no later than 24 hours after service of this order. If, due to their current location, firearms, other weapons or ammunition cannot reasonably be retrieved within the time for relinquishment, Defendant shall provide to the sheriff an affidavit listing the firearms, other weapons or ammunition and their current location no later than 24 hours after service of this order. Failure to timely relinquish any firearm, other weapon, ammunition or any firearm license shall result in a violation of this order and may result in criminal conviction under the Uniform Firearms Act, 18 Pa. C.S.A. §6105.

7. The following additional relief is granted:

Defendant is prohibited from stalking, as defined in 18 Pa.C.S.A. §2709.1, or harassing, as described in 18 Pa.C.S.A. §2709, the following family and household members of Plaintiff:

1. \_\_\_\_\_  
Name Relationship to Plaintiff

\_\_\_\_\_ Address (optional)

2. \_\_\_\_\_  
Name Relationship to Plaintiff

\_\_\_\_\_ Address (optional)

3. \_\_\_\_\_  
Name Relationship to Plaintiff

\_\_\_\_\_ Address (optional)

(Other relief) **The custody provisions of paragraph 5 of this order are temporary.**

**Either party may initiate custody proceedings pursuant to the custody statute at 23 Pa.C.S. § 5321 et seq. Any valid custody order entered after the temporary Protection From Abuse order supersedes the custody provisions of this order.**

8. A certified copy of this order shall be provided to the sheriff or police department where Plaintiff resides and any other agency specified hereafter: \_\_\_\_\_

9. THIS ORDER SUPERSEDES ANY PRIOR PROTECTION FROM ABUSE ORDER OBTAINED BY THE SAME PLAINTIFF AGAINST THE SAME DEFENDANT.

10.  THIS ORDER APPLIES IMMEDIATELY TO DEFENDANT AND SHALL REMAIN IN EFFECT UNTIL: \_\_\_\_\_ OR UNTIL OTHERWISE MODIFIED OR TERMINATED BY THIS COURT AFTER NOTICE AND HEARING.

#### NOTICE TO THE DEFENDANT

Defendant is hereby notified that violation of this order may result in arrest for indirect criminal contempt, which is punishable by a fine of up to \$1,000 and/or up to six months in jail. 23 Pa.C.S.A. § 6114. Consent of Plaintiff to Defendant's return to the residence shall not invalidate this order, which can only be changed or modified through the filing of appropriate court papers for that purpose. 23 Pa.C.S.A. § 6108 (g). If Defendant is required to relinquish any firearms, other weapons or ammunition or any firearm license, those items must be relinquished to the sheriff within 24 hours of the service of this order. As an alternative, Defendant may relinquish any firearm, other weapon or ammunition listed herein to a third party provided Defendant and the third party first comply with all requirements to obtain a safekeeping permit. If, due to their current location,

firearms, other weapons or ammunition cannot reasonably be retrieved within the time for relinquishment, Defendant shall provide an affidavit to the sheriff listing the firearms, other weapons or ammunition and their current location no later than 24 hours after the service of this order. Defendant is further notified that violation of this order may subject him/her to state charges and penalties under the Pennsylvania Crimes Code and to federal charges and penalties under the Violence Against Women Act, 18 U.S.C. § § 2261-2262.

**NOTICE TO SHERIFF, POLICE AND LAW ENFORCEMENT OFFICIALS**

This order shall be enforced by the police department or sheriff who has jurisdiction over Plaintiff's residence OR any location where a violation of this order occurs OR where Defendant may be located. If Defendant violates Paragraphs 1 through 6 of this order, Defendant shall be arrested on the charge of indirect criminal contempt. An arrest for violation of this order may be made without warrant, based solely on probable cause, whether or not the violation is committed in the presence of a police officer or sheriff.

Subsequent to an arrest, the law enforcement officer or sheriff shall seize all firearms, other weapons and ammunition in Defendant's possession which were used or threatened to be used during the violation of the protection order or during prior incidents of abuse and any other firearms in Defendant's possession. Any firearm, other weapon, ammunition or any firearm license must be delivered to the sheriff's office of the county which issued this order, which office shall maintain possession of the firearms, other weapons and ammunition until further order of this court, unless the weapon/s are evidence of a crime, in which case, they shall remain with the law enforcement agency whose officer or sheriff made the arrest.

BY THE COURT,

\_\_\_\_\_  
Judge

\_\_\_\_\_  
Date

<b>PETITION FOR PROTECTION FROM ABUSE</b>	<b>IN THE COURT OF COMMON PLEAS OF DELAWARE COUNTY, PENNSYLVANIA NO.</b>
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**1. PLAINTIFF**

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First Middle Last Plaintiff's DOB

Plaintiff's Address:

Plaintiff's address is confidential or  Plaintiff's address is: \_\_\_\_\_

**V.**

**2. DEFENDANT**

--	--	--	--

First Middle Last Suffix

Defendant's Address:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DEFENDANT IDENTIFIERS			
DOB		HEIGHT	
SEX		WEIGHT	
RACE		EYES	
HAIR			
SSN			
DRIVERS LICENSE #			
EXP DATE		STATE	

**CAUTION:**

- Weapon Involved
- Weapon Present on the Property
- Weapon Requested Relinquished

Defendant's Place of employment is: \_\_\_\_\_

Check here if you have reason to believe that Defendant is a licensed firearms dealer, is employed by a licensed firearms dealer or manufacturer; is employed as a writer, researcher or technician in the firearms or hunting industry or is required to carry a firearm as a condition of employment.

**3. I am filing this Petition on behalf of:  Myself and/or  Another Person**

If you checked "myself", please answer all questions referring to yourself as "Plaintiff". If you ONLY checked "another person", please answer all questions referring to that person as the "Plaintiff", and provide your name and address here, as filer, unless confidential.

Filer's Name:

--	--	--	--

First Middle Last Suffix

Filer's Address is Confidential or  Filer's address is: \_\_\_\_\_

If you checked "Another Person", indicate your relationship with Plaintiff:

- parent of minor Plaintiff(s)
- applicant for appointment as guardian ad litem of minor Plaintiff(s)
- adult household member with minor Plaintiff(s)
- court appointed guardian of incompetent Plaintiff(s)

4. Name(s) of All persons, including minor child/ren who seek protection from abuse:

\_\_\_\_\_  
\_\_\_\_\_

5. Indicate the relationship between the Plaintiff and the Defendant:

CHECK ALL THAT APPLY:

- spouse or former spouse of Defendant
- parent of a child with Defendant
- current or former sexual or intimate partner with Defendant
- child of Plaintiff
- child of Defendant
- family member related by blood (consanguinity) to Defendant
- family member related by marriage or affinity to Defendant
- sibling (person who shares parenthood) of Defendant

Check here if the Defendant is 17 years old or younger.

6. Have the Plaintiff and the Defendant been involved in any of the following court actions?

- Divorce
- Custody
- Support
- Protection from Abuse

If you checked any of the above, briefly indicate when and where the case was filed, and the court number, if known: \_\_\_\_\_

7. Has the Defendant been involved in any criminal court action? \_\_\_\_\_

If you answered Yes, is the defendant currently on probation or parole? \_\_\_\_\_

8. Plaintiff and Defendant are the parents of the following minor child/ren:

Name(s)	Age(s)	who reside at (list address unless confidential)
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. If Plaintiff and Defendant are parents of any minor child/ren together, is there an existing court order regarding their custody? \_\_\_\_\_

If you answered "Yes," describe the terms of the order (e.g., primary, shared, legal and/or physical custody): \_\_\_\_\_

If you answered "yes", in what county and state was the order issued? \_\_\_\_\_

If you are now seeking an order of child custody as part of this petition, list the following information:

(a) Where has each child resided during the past five years? (Please include the Child's name, Person(s) child lived with, Address unless confidential, and When.)

Child's name	Person(s) child Lived with	Address, unless confidential	When
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(b) List any other persons who are known to have or claim a right to custody of each child listed above.

Name	Address	Basis of Claim
_____	_____	_____

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. The following other minor child/ren presently live with Plaintiff:

Name(s)	Age(s)	Plaintiff's relationship to child/ren
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. The facts of the most recent incident of abuse are as follows:

Approximate Date: \_\_\_\_\_  
Approximate Time: \_\_\_\_\_  
Place: \_\_\_\_\_

Describe in detail what happened, including any physical or sexual abuse, threats, injury, incidents of stalking, medical treatment sought, and/or calls to law enforcement. (attach additional sheets of paper if necessary):

\_\_\_\_\_  
\_\_\_\_\_

12. If the Defendant has committed prior acts of abuse against Plaintiff or the minor child/ren, describe these prior incidents, including any threats, injuries, or incidents of stalking, and indicate approximately when such acts of abuse occurred. (attach additional sheets of paper if necessary):

\_\_\_\_\_  
\_\_\_\_\_

13. (a) Has Defendant used or threatened to use any firearms or other weapons against Plaintiff or the minor child/ren?

If so, please describe the use or threatened use below and list on Attachment A to Petition, which is incorporated by reference into this petition, any firearms, other weapons or ammunition Defendant used or threatened to use against Plaintiff and/or the minor child/ren:

\_\_\_\_\_  
\_\_\_\_\_

(b) Other than the firearms, other weapons or ammunition Defendant used or threatened to use against Plaintiff or the minor child/ren, does Defendant, to the best of your knowledge or belief, own or possess any additional firearm, other weapon, ammunition or any firearm license?

(c) If the answer to (b) above is "yes," list any additional firearm, other weapon or ammunition owned by or in the possession of Defendant on Attachment A to Petition, which is incorporated by reference into this petition.

(d) Plaintiff (check one)  DOES  DOES NOT request that the court order Defendant to relinquish firearms, other weapons or ammunition listed on Attachment A to Petition. If Plaintiff does seek relinquishment, identify on Attachment A to Petition the firearms, other weapons and ammunition Plaintiff requests the court to order Defendant to relinquish.

14. Identify the sheriff, police department or law enforcement agency in the area in which Plaintiff lives that should be provided with a copy of the protection order: \_\_\_\_\_

15. There is an immediate and present danger of further abuse from the Defendant.  
CHECK THE FOLLOWING BOXES ONLY IF THEY APPLY TO YOUR CASE AND PROVIDE THE REQUESTED INFORMATION



Plaintiff is asking the court to evict and exclude the Defendant from the following residence: \_\_\_\_\_

Owned by (list owners, if known): \_\_\_\_\_

Rented by (list all names, if known): \_\_\_\_\_

Defendant owes a duty of support to Plaintiff and/or minor child/ren:

Plaintiff has suffered out-of-pocket financial losses as a result of the abuse described above. Those losses are:

\_\_\_\_\_  
FOR THE REASONS SET FORTH ABOVE, I REQUEST THAT THE COURT ENTER A TEMPORARY ORDER, AND AFTER HEARING, A FINAL ORDER THAT WOULD DO THE FOLLOWING (CHECK ALL FORMS OF RELIEF REQUESTED)

A. Restrain Defendant from abusing, threatening, harassing, or stalking Plaintiff and/or the minor child/ren in any place where Plaintiff and/or the child/ren may be found.

B. Evict/exclude Defendant from Plaintiff's residence and prohibit Defendant from attempting to enter any temporary or permanent residence of Plaintiff.

C. Require Defendant to provide Plaintiff and/or minor child/ren with other suitable housing.

D. Award Plaintiff temporary custody of the minor child/ren and place the following restrictions on contact between Defendant and the child/ren: \_\_\_\_\_

\_\_\_\_\_  
 E. Prohibit Defendant from having any contact with Plaintiff and/or the minor child/ren, either in person, by telephone, or in writing, personally or through third persons, including but not limited to any contact at Plaintiff's school, business, or place of employment, except as the court may find necessary with respect to partial custody and/or visitation with the minor child/ren.

F. Prohibit Defendant from having any contact with Plaintiff's relatives and Plaintiff's children listed in this petition, except as the court may find necessary with respect to partial custody and/or visitation with the minor child/ren. The following persons are Plaintiff's relatives or family and household members that Plaintiff believes require protection from stalking and harassment by Defendant.

Name	Address (optional)	Relationship to Plaintiff
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\_\_\_\_\_  
 G. Order Defendant to temporarily relinquish some or all of the firearms, other weapons and/or ammunition listed on Attachment A to Petition and any firearm license to the sheriff of this county and/or prohibit Defendant from transferring, acquiring, or possessing some or all firearms for the duration of the order.

H. Order Defendant to pay temporary support to Plaintiff and/or the minor child/ren, including medical support and  payment of the rent or mortgage on the residence.

I. Direct Defendant to pay Plaintiff for the reasonable financial losses suffered as the result of the abuse, to be determined at the hearing.

J. Order Defendant to pay the costs of this action, including filing and service fees.

K. Order Defendant to pay Plaintiff's reasonable attorney's fees.

L. Order the following additional relief, not listed above:

\_\_\_\_\_  
 M. Grant such other relief as Plaintiff requests and/or the court deems appropriate.

N. Order the police, sheriff or other law enforcement agency to serve the Defendant with a copy of this petition, any order issued, and the order for hearing. Plaintiff will inform the designated authority of any addresses, other than the Defendant's residence, where Defendant can be served.

VERIFICATION

I verify that I am the petitioner as designated in the present action and that the facts and statements contained in the above Petition are true and correct to the best of my knowledge. I understand that any false statements are made subject to the Penalties of 18 Pa. C.S.A. §4904, relating to unsworn falsification to authorities

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PROTECTION FROM ABUSE DATA SHEET**

UPDATE     VACATED     CANCELLED

ORI:	Defendant's Name: (Last, First, Middle)		Sex:	Race:	Date of Birth:
Order Expiration Date:	Protection Order Conditions:	Brady Record Indicator:	Date Order Issued:	Defendant's Phone:	
Protection Order Number:	Originating Agency Case Number: (State Police Use Only)				
Defendant's FBI Number:	Defendant's Miscellaneous Number:		Defendant's Social Security Number:		
Defendant's Operator's License Number:	Operator's License State:		Operator's License Year:		
Defendant's Vehicle Registration Number:	Vehicle Registration State:	Vehicle Registration Year:	Vehicle Registration Type:		Vehicle Color:
Vehicle Identification Number:	Vehicle Year:	Vehicle Make:	Vehicle Model:	Vehicle Style:	Zip Code:
Defendant's Address:	City:		State:		
Miscellaneous Information:					
Defendant's Place of Birth:	Defendant's Skin Tone:	Defendant's Height:	Defendant's Weight:	Defendant's Eye Color:	Defendant's Hair Color:
Defendant's Scars, Marks, Tattoos:	Notifying Orig. Agency:		Relationship of PPN/Def:		
Protected Person's Name: (Last, First, Middle)	Protected Person's Sex:	Protected Person's Race:	Protected Person's Birth:	Protected Person's Date of Birth:	Protected Person's Phone No.:
Protected Person's Address:	Protected Person's City:		Protected Person's State:	Protected Person's Code:	Protected Person's Zip Code:
Plaintiff's Name: (Last, First, Middle)	Plaintiff's Sex:		Plaintiff's Race:		Plaintiff's Date of Birth:
Plaintiff's Address:	Plaintiff's City:		Plaintiff's State:		Plaintiff's Zip Code:

		: IN THE COURT OF COMMON PLEAS
Plaintiff		: OF DELAWARE COUNTY,
		: PENNSYLVANIA
v.		:
		:
Defendant		: CIVIL ACTION - LAW
		: PROTECTION FROM ABUSE

**Affidavit of Service**

I, \_\_\_\_\_ the undersigned, hereby state that I \_\_\_\_\_ a  
*copy of the* *(served/attempted to serve)*

\_\_\_\_\_ Notice of Hearing and Order, Petition and Temporary Order  
 \_\_\_\_\_  
*(OR enter a description of documents served)*

In the above-captioned action

Service was made upon Defendant by handing the papers to: \_\_\_\_\_  
*(Name of individual to whom papers were given)*  
 at the following address: \_\_\_\_\_  
 on this date: \_\_\_\_\_ at approximately: \_\_\_\_\_  
*(approximate time of day)*

Service was not made upon Defendant but was attempted by: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Service by regular and certified mail was \_\_\_\_\_ pursuant to the Order of Court  
*(made/attempted)*  
 dated \_\_\_\_\_ upon Defendant at the following address \_\_\_\_\_

\_\_\_\_\_ Proof of \_\_\_\_\_ has been filed with the Prothonotary.  
*(service/no service)*

**Additional Notes:** \_\_\_\_\_  
 I verify that the statements made in this Affidavit are true and correct to the best of my knowledge and belief. I understand that false statements herein are made subject to the penalties of 18Pa.C.S. §4904, relating to unsworn falsification to authorities.

\_\_\_\_\_  
*(Title of person who served the papers) (Address of person who served the papers) (Date of the Affidavit)*

THIS FORM MUST BE COMPLETED AND SIGNED BY THE PERSON WHO SERVES THE DEFENDANT WITH THE NOTICE OF HEARING AND ORDER, PETITION AND TEMPORARY ORDER. IT MUST BE FILED WITH THE PROTHONOTARY OR BROUGHT TO THE COURT ON THE HEARING DATE.

THIS FORM MUST BE FAXED TO DELAWARE COUNTY DISTRICT  
 ATTORNEY'S OFFICE: ATTN: ROSE PUCILLO-(610)891-4471 OR (610)892-0677.

IN THE COURT OF COMMON PLEAS OF DELAWARE COUNTY, PENNSYLVANIA  
CIVIL ACTION LAW

\_\_\_\_\_  
Plaintiff

v.

\_\_\_\_\_  
Defendant

PROTECTION  
FROM  
ABUSE

AFFIDAVIT OF CAUSE

I hereby state that I have been served in the above captioned action with a Protection From Abuse Order, which includes Petitioner's Attachment A. I understand that Attachment A is an inventory of firearms, other weapons, ammunition, and firearm license(s) that I have been Ordered to relinquish.

I am unable to relinquish firearms, other weapons, ammunition, and firearm license(s) for the following reasons:

- I do not own or possess any firearms, other weapons, ammunition, and firearm license(s).
- I do not own or possess the following firearms, other weapons, ammunition listed in Attachment A.
- \_\_\_\_\_
- I choose to relinquish any firearms, other weapons, ammunition, and firearm license(s) directly to the Sheriff of Delaware County, Pennsylvania. I understand that I must relinquish to the Sheriff within the next twenty four (24) hours, or if the Sheriff's Office is closed, by the close of the next business day.
- I choose to relinquish any firearms, other weapons, ammunition, and firearm license(s) directly to the \_\_\_\_\_ Police Department. Understand that said Police Department would relinquish my property to the Delaware County Sheriff's Office at their earliest convenience.
- I do not possess a Pennsylvania License to carry Firearms.
- I do possess a Pennsylvania License to carry Firearms and have relinquished it to the above referenced Law Enforcement Agency.
- I choose to relinquish any firearms, other weapons, ammunition, and firearm license(s) to a qualified third party. I understand that within twenty four (24) hours (or if the Sheriff's Office is closed, by the close of the next business day), I must appear with the third party at the Office of the Sheriff of Delaware County, Pennsylvania to begin the application process for the third party safekeeping permit.
- Due to the current location of the following firearms, other weapons, ammunition, and firearm license(s), I am unable to relinquish within the next twenty four (24) hours (or if the Sheriff's Office is closed, by the close of the next business day).

*List of Firearms, Other Weapons,  
Ammunition, Firearms License(s)*

*Address and Location of the Firearms, Other  
Weapons, Ammunition, Firearm License(s)*

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

I verify that the statements made in this Affidavit are true and correct to the best of my knowledge and belief. I understand that false statements herein are made subject to the penalties of 18 Pa. S. § 4904, relating to unsworn falsification to authorities.

**THIS FORM MUST BE FAXED TO THE DELAWARE COUNTY SHERIFF'S OFFICE  
610-891-5255 ATTN: SGT. MITCHELL**

IN THE COURT OF COMMON PLEAS  
OF DELAWARE COUNTY, PENNSYLVANIA

\_\_\_\_\_  
PLAINTIFF

vs.

NO. \_\_\_\_\_

\_\_\_\_\_  
DEFENDANT

**ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY**

1. I am the  Plaintiff  Defendant in the above-captioned (CIRCLE ONE) custody, divorce, support, protection from abuse, paternity case.

2.  This is a new case and I am representing myself in this case and have decided not to hire an attorney to represent me.

OR (check only one box)

This is NOT a new case and \_\_\_\_\_ previously  
(Name of Attorney)  
represented me in this case. However, I have decided not to be represented by that attorney and hereby direct the Prothonotary to remove that attorney as counsel of record in this case.

I have provided a copy of this form to that attorney listed above at the following address:

\_\_\_\_\_

3. My address for the purpose of receiving all future pleadings and other legal notices is: \_\_\_\_\_

\_\_\_\_\_ ; AND I understand that this address will be the only location to which important documents are sent, and that I am fully responsible to regularly check my mail at such address to ensure that I don't miss important dates or proceedings.

This is my home address.

This is not my home address.

4. My home telephone number is: \_\_\_\_\_ My email address is \_\_\_\_\_

My cellular telephone number is: \_\_\_\_\_ My facsimile number is \_\_\_\_\_

5.  I UNDERSTAND THAT I MUST FILE A NEW FORM EVERY TIME MY ADDRESS, HOME TELEPHONE NUMBER OR CELLULAR TELEPHONE NUMBER CHANGES – NO EXCEPTIONS!

6.  I have provided a copy of this form to all other attorneys or other self-represented parties at the following addresses as listed below: (use reverse side if you need more space)

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

7.  I fully understand that by deciding to represent myself, the Court will hold me to the same standards of knowledge regarding the Statutory law, Evidence law, Local and State Rules of Procedure and applicable case law as a Pennsylvania licensed attorney, and that I must be fully prepared to meet those responsibilities.

I verify that the statements made in this Entry of Appearance as a Self-Represented Party are true and correct. I understand that if I make false statements herein, that I am subject to the criminal penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities which could result in a fine and/or prison term.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Your Signature)



LAWYER FOR YOU. IF YOU DO NOT HAVE A LAWYER GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER. IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE. IF YOU CANNOT FIND A LAWYER, YOU MAY HAVE TO PROCEED WITHOUT ONE.

**County Lawyer Referral Service:**

Agency Name: Delaware County Bar Association

Street Address: Front and Lemmon Street

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