

PETITION FOR EMERGENCY RELIEF FOR CUSTODY (Beaver County)

EMERGENCY RELIEF WILL ONLY BE AWARDED IF THERE IS A TRUE EMERGENCY. A true emergency is, but not limited to, a risk that the other parent has or will run away from the County with the Child without a known destination or that no parent is available to care for the child(ren) or there is genuine threat of harm to the child.

**IF THERE IS A THREAT OF IMMEDIATE HARM TO THE CHILD,
YOU CAN ALSO CALL CHILD YOUTH SERVICES AT 724-891-5800.**

Please note that the law librarian, staff of the Beaver County Law Library, staff of the Juvenile Services Division, staff of the Court Administrator's Office and the Judge's Law Clerk are either not qualified nor permitted to assist persons in the preparation or filing of child custody documents or to provide legal advice or assistance of any kind on child custody or any other legal matters.

LITIGANTS ARE STRONGLY ENCOURAGED TO CONSULT WITH AN ATTORNEY. If you need an attorney, you may contact Beaver County Bar Association's Lawyer Referral Service at 724-728-4888 at a reduced rate for the initial consultation.

SUMMARY OF STEPS

Before you go to Court:

1. Complete the forms in **ink**, not pencil. Incomplete forms will be refused. You **must** attach your current Custody Order.
2. If you have not completed the required Educational Seminar, you *may* not be able to take action on your case until doing so. Please verify that a copy of your certificate of completion is on file in the Prothonotary's Office if you have completed the class.
3. When filling out the forms parties must be identified as Plaintiff or Defendant as they are listed on the *original* custody Complaint, regardless of who is filing the Petition.
4. Photocopy all of the paperwork (*except the Proof of Service and Acceptance of Service forms*).
5. **SERVE** the other party a copy of all of the forms along with the Notice of Intention to Present at **least 24 hours before** you present the Emergency Petition to the Judge. **If the other party has an attorney, you must serve the attorney.**
 - a. The date you write on this form is the day you plan to deliver the documents to Court. It must be at least 24 hours away and must be a Tuesday or Thursday or by special permission.
 - b. Directions on how to serve the other party are attached. (Pa. R.C.P. No. 440).
6. Have the other party's phone number with you to provide to the Court.
7. **IN ADDITION TO THE EMERGENCY PETITION, YOU MUST ALSO FILE ---**
 - a custody complaint if you **DO NOT** have an existing Custody order
 - a modification petition if you **DO** have an existing Custody order
8. Notice to incarcerated parent- If the other parent is presently **incarcerated**, ask library staff for this form and include it with the Petition.
9. **YOUR FORMS MUST BE IN NUMERICAL ORDER WHEN YOU GO TO COURT.**
10. If you are representing yourself, you must file an Entry of Appearance as a Self-Represented Party form.

In Court:

- 11. Take **completed ORIGINAL** forms to Motions Court, Courtroom #4, Second Floor of the Courthouse, **no later than 8:45 a.m. any Tuesday or Thursday** and check in with the tip staff. Late motions will not be heard.
- 12. A law clerk will review your paperwork for proper completion.
- 13. The Judge will review the petition, hear testimony, and issue an Order or assign a hearing date, if needed. You will then receive a clocked copy of the Order and the original will be returned to you to file in the Prothonotary’s office.

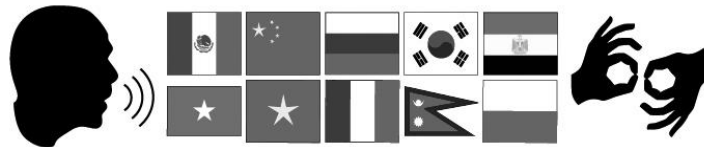
After you leave the Courtroom:

- 14. **File** the papers in the Prothonotary’s Office (1st floor). There will be a filing fee.
- 15. **Serve** the other party with the Order signed by the Judge if the other party is not present. Service is made pursuant to Pa.R.C.P. No. 440, which is attached.
- 16. **File** either a Proof of Service or Acceptance of Service Form with the Prothonotary after service has been done if the other party was not present at the proceeding. **MAKE AND KEEP A COPY FOR YOURSELF.**
- 17. Bring a copy of the Proof of Service or Acceptance of Service that you filed in the Prothonotary’s office to **ALL** later hearings, conferences and/or trials.

IMPORTANT INFORMATION

If there is a PFA, you may send the legal paperwork but do **NOT** include any other letters, notes, etc. If it is a true emergency, you may have a family member or friend call or hand deliver copies of the notice. Only in extreme emergencies will the Judge accept oral notice.

Notice of Language Rights



Language Access Coordinator
 Beaver County Courthouse, 810 Third Street, Beaver, PA, 15009
 724-770-4770
languageaccess@beavercountypa.gov

English: You have the right to an interpreter at no cost to you. To request an interpreter, please inform court staff using the contact information contained in this notice.

Spanish/Español: Usted tiene derecho a un intérprete libre de costo. Para solicitar un intérprete favor de informárselo al personal judicial utilizando la información provista en la parte superior de este aviso.

ASL interpreters are also available upon request.

**For questions pertaining to the updated *Case Records Public Access Policy of the Unified Judicial System* and the last three pages of this document, please visit:
<https://www.pacourts.us/public-records/public-records-policies>**

**IN THE COURT OF COMMON PLEAS OF BEAVER COUNTY
PENNSYLVANIA**

_____,
Plaintiff,
vs. _____, No. _____
Defendant.

NOTICE OF INTENTION TO PRESENT

TO: _____

(name & address of the other party)

Please take notice that I intend to present the attached Motion/Petitions on (date)_____ at 8:45 a.m., Courtroom No. 4, Beaver County Courthouse, Beaver, PA. If you wish to oppose the requested relief or action, you should appear at that time and present your objections to the court.

Date _____

Plaintiff/ Defendant

CERTIFICATION OF SERVICE

I hereby certify that I have caused to be served a true and correct copy of the attached on the above named plaintiff/ defendant at least 24 hours prior to the date of presenting the Emergency Motion by way of (check all that apply):

- _____ regular mail
- _____ certified mail
- _____ hand delivery

Plaintiff/ Defendant

IN THE COURT OF COMMON PLEAS OF BEAVER COUNTY
P E N N S Y L V A N I A

CIVIL DIVISION

_____	:	No. _____
Plaintiff,	:	Civil Action – Law
	:	
vs.	:	Type of Pleading:
	:	Petition for Emergency Relief
	:	
_____	:	Filed on behalf of:
Defendant.	:	_____
		(Your Name)
		Filing Party's Information:(Your Name)
		Name: _____
		Address: _____

		Telephone #: _____

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

_____,
Plaintiff,
vs. _____
_____,
Defendant. No. _____

EMERGENCY PETITION FOR CUSTODY

1. Plaintiff/Defendant is _____, and is the (circle one) mother/father of the child(ren) (initials of children ONLY): _____. Plaintiff/Defendant is the (circle one) plaintiff/defendant in this case; Plaintiff/Defendant currently resides at (give full address): _____, Pennsylvania.

2. Plaintiff/Defendant is _____, and is the (circle one) mother/father of the child(ren) (initials of children ONLY): _____. Plaintiff/Defendant is the (circle one) plaintiff/defendant in the above-captioned matter; respondent currently resides at (give full address): _____, Pennsylvania.

3. The child(ren):
(a) initials _____ birth year _____, presently resides with _____ at (give full address): _____.
(b) initials _____ birth year _____, presently resides with _____ at (give full address): _____.
(c) initials _____ birth year _____, presently resides with _____ at (give full address): _____.

4. Date of Existing Custody Order: _____.

5. Emergency is necessary because:

(Allege specifically what happened, why the situation is an emergency and what you are asking the Court to do. Do NOT use your child(ren)'s names. You MUST use initials rather than names)

WHEREFORE, Plaintiff/Defendant respectfully requests this Court grant the Emergency requested.

Plaintiff/ Defendant's Signature

I AM OVER THE AGE OF 18. Yes / No (CIRCLE ONE)

VERIFICATION

I, _____, verify that the statements made in this Petition for Emergency Custody are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. Cons. Stat. Ann § 4904, relating to unsworn falsification to authorities which provides that if I knowingly make false averments, I may be subject to criminal penalties.

Plaintiff/ Defendant

Date: _____

INSERT
CURRENT
CUSTODY
ORDER
HERE

IN THE COURT OF COMMON PLEAS OF BEAVER COUNTY
PENNSYLVANIA

_____,
Plaintiff,
vs. _____ No. _____
_____,
Defendant.

PROOF OF SERVICE

I _____ (*your name*), hereby certify that I delivered a copy of the
(*name of document*) _____ to
_____ (*name of party*) on _____ (*date*),
at _____ o'clock p.m./a.m. Delivery was made by (check all that apply):

- _____ regular mail
- _____ certified mail
- _____ hand delivery

DATE

PLAINTIFF/ DEFENDANT

IN THE COURT OF COMMON PLEAS OF BEAVER COUNTY
PENNSYLVANIA

_____,
Plaintiff,
vs. _____, No. _____
Defendant.

ACCEPTANCE OF SERVICE

I accept service of the _____ (*name of document*). I certify that I am authorized to accept service on behalf of plaintiff/defendant.

DATE

PLAINTIFF/DEFENDANT OR AUTHORIZED AGENT

MAILING ADDRESS

Note: If Plaintiff/Defendant accepts service personally, the second sentence should be deleted.

IN THE COURT OF COMMON PLEAS OF BEAVER COUNTY,
PENNSYLVANIA
CIVIL – LAW

_____,
Plaintiff,
vs. _____, No. _____
Defendant.

ORDER

AND NOW, this ____ day of _____, 20____, upon consideration of the
Petition for Emergency Relief filed by the _____, it is hereby

ORDERED and DECREED as follows: (Judge will list relief granted in this space):

BY THE COURT,

JUDGE

CERTIFICATE OF COMPLIANCE

RE: ACCESS TO COURT CASE RECORDS

CASE NO. _____

I certify that this filing complies with the provisions of the Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts that require filing confidential information and documents differently than non-confidential information and documents.

Submitted by: _____

Signature: _____

Name: _____

Attorney No. (if applicable): _____

Rev. 02/22/18

PLAINTIFF

vs.

IN THE COURT OF COMMON PLEAS
BEAVER COUNTY, PENNSYLVANIA

NO. _____

DEFENDANT

ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY

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

2. This (CIRCLE ONE) is/is not 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. I have decided not to be represented by that attorney and direct the Prothonotary to remove that attorney as my counsel of record in this case.

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

OR (check only one box)

I am entering my appearance as a self-represented party (sign) _____

I am withdrawing my appearance as attorney in this case (attorney signature) _____

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

_____. I understand that this address will be the only address to which notices and pleadings in this case will be sent, and that I am responsible to regularly check my mail at this address to ensure that I do not miss important deadlines or proceedings.

This is my home address. This is not my home address.

4. My telephone number where I can be reached during normal business hours (8:30 a.m. – 4:30 p.m. Monday – Friday) is _____

_____. My email address is _____

My telephone number is confidential pursuant to a Protection From Abuse Order.

5. **I UNDERSTAND I MUST FILE A NEW FORM EVERY TIME MY ADDRESS OR TELEPHONE NUMBER CHANGES.**

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)

Pa.R.C.P. No. 440

Rule 440. Service of Legal Papers other than Original Process

(a)(1) Copies of all legal papers other than original process filed in an action or served upon any party to an action shall be served upon every other party to the action. Service shall be made:

(i) by handing or mailing a copy to or leaving a copy for each party at the address of the party's attorney of record endorsed on an appearance or prior pleading of the party, or at such other address as a party may agree, or

(ii) by transmitting a copy by facsimile to the party's attorney of record as provided by subdivision (d).

(2)(i) If there is no attorney of record, service shall be made by handing a copy to the party or by mailing a copy to or leaving a copy for the party at the address endorsed on an appearance or prior pleading or the residence or place of business of the party, or by transmitting a copy by facsimile as provided by subdivision (d).

(ii) If such service cannot be made, service shall be made by leaving a copy at or mailing a copy to the last known address of the party to be served.

(b) Service by mail of legal papers other than original process is complete upon mailing.

(c) If service of legal papers other than original process is to be made by the sheriff, he shall notify by ordinary mail the party requesting service to be made that service has or has not been made upon a named party or person.

(d)(1) A copy may be served by facsimile transmission if the parties agree thereto or if a telephone number for facsimile transmission is included on an appearance or prior legal paper filed with the court.

(2) The copy served shall begin with a facsimile cover sheet containing (i) the name, firm, address, telephone number, of both the party making service and the party served, (ii) the facsimile telephone number of the party making service and the facsimile telephone number to which the copy was transmitted, (iii) the title of the legal paper served and (iv) the number of pages transmitted.

(3) Service is complete when transmission is confirmed as complete.

**CONFIDENTIAL
INFORMATION
FORM**



Case Records Public Access Policy of the Unified Judicial System of Pennsylvania
204 Pa. Code § 213.81
www.pacourts.us/public-records

(Party name as displayed in case caption)

Docket/Case No.

Vs.

(Party name as displayed in case caption)

Court

This form is associated with the pleading titled _____, dated _____.

Pursuant to the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania*, the Confidential Information Form shall accompany a filing where confidential information is **required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter**. This form, and any additional pages, shall remain confidential, except that it shall be available to the parties, counsel of record, the court, and the custodian. This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

This Information Pertains to:	Confidential Information:	References in Filing:
<p>_____ (full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p> <p>_____ (full name of minor)</p> <p>and date of birth: _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN 1</p> <p>Alternative Reference: FAN 1</p> <p>Alternative Reference: DLN 1</p> <p>Alternative Reference: SID 1</p>
<p>_____ (full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p> <p>_____ (full name of minor)</p> <p>and date of birth: _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN 2</p> <p>Alternative Reference: FAN 2</p> <p>Alternative Reference: DLN 2</p> <p>Alternative Reference: SID 2</p>

**CONFIDENTIAL
INFORMATION
FORM**



Additional page(s) attached. _____ total pages are attached to this filing.

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Signature of Attorney or Unrepresented Party

Date

Name: _____

Attorney Number: (if applicable) _____

Address: _____

Telephone: _____

Email: _____

NOTE: Parties and attorney of record in a case will have access to this Confidential Information Form. Confidentiality of this information must be maintained.

**CONFIDENTIAL
INFORMATION
FORM**



*Additional page (if
necessary)*

This Information Pertains to:	Confidential Information:	References in Filing:
<p>_____</p> <p>(full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p> <p>_____</p> <p>(full name of minor)</p> <p>and date of birth: _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN ____</p> <p>Alternative Reference: FAN ____</p> <p>Alternative Reference: DLN ____</p> <p>Alternative Reference: SID ____</p>
<p>_____</p> <p>(full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p> <p>_____</p> <p>(full name of minor)</p> <p>and date of birth: _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN ____</p> <p>Alternative Reference: FAN ____</p> <p>Alternative Reference: DLN ____</p> <p>Alternative Reference: SID ____</p>
<p>_____</p> <p>(full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p> <p>_____</p> <p>(full name of minor)</p> <p>and date of birth: _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN ____</p> <p>Alternative Reference: FAN ____</p> <p>Alternative Reference: DLN ____</p> <p>Alternative Reference: SID ____</p>