

INFORMATION ON FILING SUMMARY APPEALS

(TO APPELLANT: PLEASE READ CAREFULLY)

A \$50.00 filing fee must accompany the properly completed SUMMARY APPEAL form. This fee is non-refundable. Checks are to be made payable to the Clerk of Courts.

If you are without funds to pay the filing fee, you must prepare and submit to the Court a Petition to Proceed in Forma Pauperis. We have forms, or you may go to the Law Library located in the basement of this building to research the preparation of a formal petition. There are no exceptions – you must have the necessary fee or permission from the Court to proceed IFP. **THIS FORM MUST BE SUBMITTED TO THE COURT IN PERSON.**

This office will provide notification of the assigned initial hearing date to the Appellee (person filing), the District Justice, the District Attorney, and the Affiant (prosecuting officer). **THIS IS THE ONLY NOTICE THAT YOU WILL RECEIVE OF THE HEARING.**

You must be present in Court at the assigned time, prepared to proceed with your case. If you have engaged the services of an attorney, he/she should be present with you in court. You may bring any witnesses; you are responsible for the payment of fees to said witnesses.

If the assigned date for the hearing is inconvenient, you may petition the Court for a continuance. (If the Court grants a continuance, you or your attorney are responsible for notifying all interested parties.)

Should the Commonwealth seek a continuance, you will be notified of the continuance by regular mail at the address indicated on your appeal form. If your address should change, please notify this office immediately.

At the time of sentencing, the Court will impose sentence, which may include costs and fines. You will be expected to pay in full any amount due on the date of sentencing. If you cannot pay, you must request additional time directly from the Court at your sentencing hearing. The Court will instruct you as to your appeal rights. If payment arrangements are to be made, please report to the Clerk of Courts Collection Department (located in the basement of this building).

Within ten (10) days of the disposition of your case, if appropriate, a form will be submitted to the Department of Transportation for updating your file.

Frank Scandale

Clerk of Courts

LICENSE INFORMATION:

If your appeal is from a motor vehicle conviction that will result in your driver's license being suspended, you may obtain a certification from the Clerk of Courts that you have filed an appeal.

You must mail a certified copy of your appeal form to: PA

DEPARTMENT OF TRANSPORTATION
Correspondence Unit
PO Box 68618
Harrisburg Pa 17106

(ONLY FOR LICENSE IN JEOPARDY OF SUSPENSION/NOT POINTS)

**IN THE COURT OF COMMON PLEAS OF WASHINGTON COUNTY, PENNSYLVANIA
NOTICE OF APPEAL FROM SUMMARY CONVICTION**

PLEASE TYPE OR PRESS FIRMLY WITH PEN!

Name and Address of Defendant

_____ Zip _____

Date of Appeal _____

Issuing Authority Dkt. No. _____

Citation No. _____

Magisterial District No. _____

Date of District Justice Sentence _____ for Offense (s) _____

Date of entry of guilty plea, conviction, or other final order from which appeal is taken: _____

Name and mailing address of affiant/prosecutor as shown on citation or complaint (arresting officer)

If sentence includes fines and costs, amount paid, if any: _____

Type or amount of bail furnished to issuing authority, if any: _____

Name and address of issuing authority (District Justice)

_____ Zip _____

Name and address of attorney for defendant, if any: I.D.# _____

Printed Name: _____

Address: _____ Zip _____

Signature: _____

NOTE: If appeal is filed by an attorney, signature indicates entry of appearance for purposes of appeal.

I hereby acknowledge personal service of a copy of this notice scheduling a SUMMARY COURT HEARING before Judge _____ on _____, 20_____, at _____ a . m . in Courtroom No. _____, County Courthouse, Washington, PA. If I cannot attend this scheduled hearing, I will seek a continuance. If a continuance is granted, I will notify the District Attorney of continuance in writing. Should I secure the services of counsel, I will notify said counsel of this hearing and advise counsel that he must enter an appearance for me to receive hearing notices.

Sworn to and subscribed before me
this _____ day of _____, 20 _____

APPELLANT/ATTORNEY

NOTICE TO DEFT.: IF APPEAL IS FROM MOTOR VEHICLE CONVICTION OTHER THAN PARKING, YOU MAY ASK FOR A CERTIFIED COPY OF THIS APPEAL WHICH YOU SHOULD MAIL TO: PA DEPT OF TRANSPORTATION, BUREAU OF LICENSING, P.O. BOX 60037, HARRISBURG, PA 17106.

Frank Scandale, CLERK OF COURTS
Washington County, Pennsylvania
My Term Expires: 1st Monday, January, 20 _____

SERVICE

District Attorney _____ *Issuing Authority: _____ Fax Mail

*Affiant: # _____

NOTE: *Service, the above date unless otherwise specified and by Certified Mail, Return Receipt Requested.

Filing Fee Ck. _____ Cash _____

DISTRIBUTION OF COPIES: White — Clerk of Courts; Green — District Attorney; Canary — Affiant; Pink — Issuing Authority; Goldenrod — Defendant Blue — Judge