

Date of Application: _____

Case Number: _____

ADAMS COUNTY PUBLIC DEFENDER APPLICATION

Please print and fill in the application completely. delays will result if information is not legible. If you receive any other new charges, you must re-apply for every charge. Please bring all of your legal paperwork and most recent 3 pay stubs with you.

Last Name: _____ First Name: _____ Middle Name: _____

Alias: _____ Date of Birth: _____

Driver's License #: _____ Driver's License State: _____ Social Security #: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone # (home): _____ (cell): _____

Interpreter Needed: Yes No Language: _____

Please place a check next to all that apply:

you are here for: Criminal Charges Parole/Probation/IPP Violation Appeal Issues
 Other

What are your charges: _____

Who else was involved: _____

Magisterial District Judge: _____ Current bail amount for all charges: _____

Next Court Date: _____ Time: _____

Type (Check one):

Preliminary Hearing Waived Preliminary Hearing Arraignment Pre-Trial Conference
 Plea Trial

Do you have any other pending charges: Yes No Charges: _____

If Yes, please explain and name your attorney: _____

Do you have a prior adult criminal record: Yes No

Are you presently on probation or parole: Yes No

Marital Status: _____ Number for Children: _____ Ages: _____

Are you a US Citizen: Yes No

Are you currently employed: Yes No Where: _____

Weekly Net Pay: _____

Savings/Checking account balance: _____

Do you receive SSI/SSD: Yes No Monthly amount: _____

Does your Spouse/live-In/Significant Other work: Yes No Where: _____

His or Her Savings/Checking account balance: _____ SSI/SSD: _____

Does anyone in household currently receive: Welfare Unemployment Other _____
Amount: _____ How often: _____

Real Estate Owned: _____ Valued: _____ Mortgage Balance: _____

is there anybody with whom we have your permission to speak with regarding your case: Yes No

If yes, what is their name and relation to you: _____

Do we have permission to speak to the: District Attorney Assistant District Attorney Prosecuting Officer or

District Judge regarding your case prior to our first appearance on your behalf: _____

THE COURT OF COMMON PLEAS OF ADAMS COUNTY, PENNSYLVANIA
CRIMINAL

COMMONWEALTH OF PENNSYLVANIA

Criminal Action

Vs.

Case No. _____

ALL QUESTIONS MUST BE ANSWERED AND THE AFFIDAVIT COMPLETED BEFORE THE COURT WILL ACT ON THE PETITION.

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF ADAMS

: SS.
:

....., being duly sworn according to law, upon (his) (her) oath, deposes and says:

1. I am the petitioner in the above entitled action.
2. I have read the foregoing petition and know the contents thereof and the same are TRUE to my own knowledge, except as to matters therein stated to be alleged as to persons other than myself, and, as to those matters I believe it to be true.
3. This affidavit is made to inform the Court as to my status of indigence and to induce the Court to assign counsel to me as an indigent defendant for my defense against the criminal charges that have been made against me.
4. In making this affidavit I am aware that PERJURY is a felony and that the punishment is a fine of not more than \$15,000 or imprisonment for not more than seven years or both.
5. I understand that I must advise the Court immediately of any material change in my financial circumstances such as but not limited to, and increase of wages or new employment.

Signature of Defendant

