

# Local Rules of Criminal Procedure

Erie County Court of Common Pleas  
6<sup>th</sup> Judicial District of Pennsylvania

Revised: June 30, 2025

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## **RULE 106 - CONTINUANCES**

A deadline shall exist for the filing of continuances by either the Commonwealth or a defendant for cases listed for a particular trial term. A motion for continuance shall be made not later than 48 hours before the first day of the trial term. Notice as to the first day of each trial term shall be published by the court in its annual schedule. All requests for continuances must be made in writing. A motion for continuance must include the following:

- 1) a complete list of all pending charges,
- 2) the date the criminal complaint was filed,
- 3) the number of previous continuances requested by the moving party,
- 4) an indication of whether the defendant is incarcerated at the time of the filing,
- 5) the reasons that a continuance is being requested,
- 6) the party to which the period of delay should be attributed,
- 7) when the parties agree that the period of delay should be attributed to the defendant, the filing must include a signed waiver of speedy trial rights from the first day of the trial term from which the case will be continued to the first day of the next available trial term. (The “next available trial term” shall mean the second trial term from the date of the request for continuance.); and
- 8) the position of the adverse party and any other parties in the case.

A sample motion for continuance is provided in the appendix which accompanies these local rules. Any motions for continuance filed before the deadline shall be considered by the pre-assigned judge. After the term commences, all motions for continuance must be considered by the judge who will preside over the case at trial.

## **RULE 117 - MAGISTERIAL DISTRICT JUDGE COVERAGE FOR ISSUING WARRANT; PRELIMINARY ARRAIGNMENTS AND SUMMARY TRIALS; AND SETTING AND ACCEPTING BAIL**

To the extent required by Pa.R.Crim.P. 117, Magisterial District Judges shall be available to provide continuous coverage for the issuance of search warrants, the issuance of arrest warrants, accepting complaints, setting and accepting bail, conducting summary trials, and conducting preliminary arraignments. The provision of continuous coverage shall be by the traditional on-call

system as presently established and exercised in Erie County. Specifically, the Magisterial District Judges shall remain on-call during non-regular business hours on a rotating basis. The Assistant Court Administrator shall maintain a copy of said rotating schedule.

Magisterial District Judges, the Clerk of Courts and the Warden of the Erie County Prison shall be authorized to accept bail pursuant to, and subject to the limitations of, the Pennsylvania Rules of Criminal Procedure. The Warden's authority is limited to accepting the bail deposit, delivering the bail to the issuing authority or clerk of courts and, under Pennsylvania Rule of Criminal Procedure 525 releasing the defendant upon execution of the bail bond.

Regular business hours for each Magisterial District Judge Office shall be Monday through Friday from 8:30a.m. until 4:30 p.m.

#### **RULE 310 – ACCELERATED REHABILITATION DISPOSITION**

A. **ARD.** An original application for entry into the Accelerated Rehabilitation Disposition (ARD) program shall be filed with the Clerk of Courts, and copies shall be filed at the Office of the Criminal Court Administrator and the Erie County District Attorney's

Office or, where applicable, the Attorney General's Office. The Criminal Court Administrator shall mark the date of filing on the copy. The application shall include language that waives Pa.R.Crim.P. 600. *See*, Local Rule 310(D). A sample application for ARD is provided in the appendix which accompanies these local rules.

B. **Effect on Filing Deadlines.** The filing deadlines imposed by the Pennsylvania Rules of Criminal Procedure shall be specially calculated in those instances where a defendant applies for, is refused entry into, or is revoked from, the ARD program as follows:

1. When the application is made before arraignment, all filing deadlines are preserved, and calculations shall commence upon date of refusal or revocation.
2. When the application is made after arraignment, filing of the application shall toll the running of the deadlines. Any number of days remaining shall remain and calculations will recommence upon date of refusal or revocation.
3. When any filing deadline has passed before the filing of the ARD application, that

deadline shall be deemed missed and unavailable except upon order of the court.

- C. If properly waived by the defendant, as indicated in an application for ARD or in an additional filing, each case which is refused entry into the ARD program or revoked therefrom shall go to trial during the term of court determined by Court Administration based upon the speedy trial rule calculations. Proper waiver, as indicated above, exists when the defendant signs a speedy trial rule waiver which specifically extends the period of waiver from the date the application for ARD is filed through the date when the application is denied or the defendant is revoked from the ARD program.

## **RULE 570 - CASE ASSIGNMENTS**

- A. **Pre-trial.** All cases held for court will be assigned to one of the Judges in the Criminal Division. This will be done by the Court Administrator at or about the time of arraignment or waiver thereof. The assigned judge will hear and resolve all pre-trial matters pertaining to the case. If a case proceeds to trial before a judge other than the assigned judge, the trial judge shall entertain any motions *in limine* and other motions related to trial. However, the trial judge may, at his or her discretion, refer any Rule 600 motions to the assigned judge.
- B. **Treatment Courts.** After the filing of a criminal information, an original application for entry into the Drug Court, Veterans' Court, or Mental Health Court programs shall be filed with the Clerk of Courts, and copies shall be filed at the Office of the Criminal Court Administrator and the Erie County District Attorney's Office. Two sample applications are provided in the appendix which accompanies these local rules.
- C. **Sentencing.** In all cases wherein a jury trial has been held and a verdict entered, the trial judge shall be the sentencing judge. However, in any case where the designated judge may be unavailable for sentencing due to extraordinary circumstances, another judge may be substituted. *See also*, Local Rule 700.
- D. **Sentencing Date.** A sentencing date shall be set for all cases at the time of plea or verdict. Any change requested on this date must be made directly with the assigned sentencing judge

and subject to his/her discretion.

### **RULE 571 - ARRAIGNMENT**

The defendant and counsel (or a representative of counsel) shall be required to appear at the scheduled time of arraignment unless a waiver is filed. The defendant and counsel may waive appearance at arraignment by the filing of a signed "Waiver of Arraignment and Entry of Appearance" before the scheduled date of arraignment. A sample Waiver of Arraignment is provided in the appendix which accompanies these local rules.

### **RULE 575 - PROCEDURE FOR ATTORNEY CHANGES**

If, before or at the arraignment, another attorney files an appearance, or files any papers on behalf of the defendant (including signing the rights sheet) that attorney will be listed as the attorney of record.

**Exception for Public Defender.** This procedure will apply to the public defender, except when the change is merely from one public defender to another.

### **RULE 576 -PRESENTATION, FILING AND SERVICE OF MOTIONS**

- A. **Presentation.** In all court cases a specific judge of the criminal division shall be assigned to each case at or before the time of formal arraignment in the Court of Common Pleas. All pre-trial motions shall be filed with the clerk of courts and delivered to assigned judge either by hand delivery to the assigned judge's chambers or by U.S. Mail. If there is no judge assigned to the case at the time a party intends to present a motion, then the motion shall be delivered in the same manner to the judge then serving as the motion court judge in the Criminal Division. All motions shall indicate in writing whether all counsel of record and any unrepresented parties consent to the relief requested.
- B. **Filing.** After a scheduling order or a final order has been signed by the assigned judge, the Court must file the original with the Clerk of Courts, which will effectuate service of all orders and notices pursuant to Pennsylvania Rule of Criminal Procedure 114(B).
- C. **Service.** Time-stamped copies of the scheduling order or final order must be served by

the Clerk of Courts upon the Criminal Court Administrator, all counsel of record, and any unrepresented parties by personal delivery, U. S. First Class Mail, or as otherwise permitted by Pennsylvania Rule of Criminal Procedure 576(B). *Note:* Sending a copy by “facsimile transmission or other electronic means if the party’s attorney, or the party if unrepresented, has made a written request for this method of service for the document” is expressly permitted under Pennsylvania Rule of Criminal Procedure 576(B)(1)(f).

#### **RULE 590 - POST-ARRAIGNMENT PLEAS, PLEAS, AND PLEA AGREEMENTS**

A defendant may enter a plea of guilty or, with the consent of the judge, *nolo contendere* pursuant to a plea agreement at any time before the verdict.

If a defendant enters a plea of guilty or, with the consent of the judge, *nolo contendere* before the court no later than ten (10) days after arraignment, the defendant may have the option of selecting an assignment to another judge of the trial division, other than the original assigned judge, for purposes of sentencing.

If a defendant applies for ARD/PWOV or Treatment Court programs within ten (10) days after arraignment but the application is denied, the defendant shall retain the option of selecting an assignment to another judge of the trial division, other than the original assigned judge, provided that such plea of guilty or *nolo contendere* is scheduled before the court no later than ten (10) days after the denial of the application. *See also*, Local Rule 700.

#### **RULE 600 - TRIAL TERM**

- A. **Criminal Trial Calendar.** The court calendar shall be divided into ten (10), two (2) two-week trial terms unless modified by the Court.
- B. **Notice of Trial.** All defendants and their counsel of record in cases listed for a trial term shall be given written notice by the Court Administrator at least one (1) month before the start of the trial term.
- C. **Exceptions.** Late additions may be made only for Rule 600 problem cases or by Order of

Court.

## **RULE 700 - SENTENCING JUDGE**

The assigned judge shall impose sentence unless otherwise provided by the rules. In the event a defendant enters a plea of guilty or *nolo contendere* within (10) days after arraignment or refusal from the ARD/PWOV or Treatment Court programs, the post-arraignment plea judge shall be responsible for sentencing the defendant. *See*, Local Rule 590. The defendant shall also have the option, with the consent of the judge and the Commonwealth, to be immediately sentenced by the judge taking the plea, even if that judge was not originally assigned to the case; however, if the sentence is deferred, the sentence shall be imposed by the judge who was originally assigned the case.

The judge assigned to a revocation proceeding shall be the judge who imposed the original sentence. If the original sentencing judge is no longer serving on the bench, then the revocation proceeding shall be assigned to the judge who is assigned to another active docket for the defendant. A revocation proceeding may also be handled by the judge who is sentencing the defendant at another active docket, where doing so promotes the interests of justice and/or judicial economy. If there is no other active docket for the defendant, then the sentencing judge for a revocation proceeding shall be chosen by Court Administration.

## **APPENDIX**

Sample Motion for Continuance

Sample Application for ARD

Sample Application for Treatment Court

Sample Application for Veterans Court

Sample Waiver of Arraignment

Sample Substitution of Counsel

# Local Rules of Criminal Procedure

## Erie County Court of Common Pleas

### 6<sup>th</sup> Judicial District of Pennsylvania

#### **APPENDIX**

1. Sample Motion to Continue Trial and Order
2. Sample Application for ARD
3. Sample ARD Motion
4. Sample Application for Treatment Court
5. Sample Application for Veterans Court
6. Sample Waiver of Arraignment
7. Sample Substitution of Counsel

# Appendix 1

COMMONWEALTH OF PENNSYLVANIA : IN THE COURT OF COMMON PLEAS  
v. : OF ERIE COUNTY, PENNSYLVANIA  
: :  
[ENTER NAME] : Docket No. [ENTER NUMBER]

**[ENTER PARTY] MOTION TO CONTINUE TRIAL**

Please take notice this \_\_\_\_\_ day of \_\_\_\_\_ that [ENTER PARTY], files this Motion to Continue Trial as follows:

1. The above case is scheduled for trial during the [ENTER MONTH] term of Court.
2. On [ENTER DATE] the criminal complaint was filed.
3. Defendant is accused of the following offenses: [ENTER CHARGES].
4. The undersigned counsel requests a continuance because [ENTER REASONS].
5. This case was continued on [ENTER NUMBER] previous occasion(s) by the Commonwealth/Defendant.
6. For the purpose of Rule 600, the delay caused by this continuance shall be attributed to [ENTER PARTY].
7. [ENTER ADVERSE COUNSEL][objects/does not object] to the relief requested.
8. [ENTER ADVERSE COUNSEL][objects/does not object] to the Rule 600 analysis.
9. [ONLY IF APPLICABLE] Defendant has signed a Rule 600 Waiver, attached as Exhibit A, waiving his/her speedy trial rights until [ENTER DATE].

WHEREFORE, [ENTER PARTY] respectfully requests this Honorable Court continue the trial in this case to the [ENTER MONTH] term of Court.

Respectfully submitted,

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COMMONWEALTH OF PENNSYLVANIA : IN THE COURT OF COMMON PLEAS  
v. : OF ERIE COUNTY, PENNSYLVANIA  
: :  
[ENTER NAME] : Docket No. [ENTER NUMBER]

**ORDER**

AND NOW, this \_\_\_\_\_ day of \_\_\_\_\_, upon consideration  
of the foregoing [ENTER PARTY] Motion to Continue Trial, the relief requested is hereby  
GRANTED. This case shall be listed for trial during the \_\_\_\_\_ term of  
Court.

It is FURTHER ORDERED that the delay shall be attributed to [ENTER PARTY] for the  
purpose of Rule 600.

BY THE COURT:

\_\_\_\_\_, J.

cc: Clerk of Courts  
Court Administration  
District Attorney's Office  
All Counsel of Record

COMMONWEALTH OF PENNSYLVANIA

v.

[ENTER NAME]

: IN THE COURT OF COMMON PLEAS  
: OF ERIE COUNTY, PENNSYLVANIA  
:  
:  
:  
: Docket No. [ENTER NUMBER]

### **RULE 600 WAIVER**

I have been advised and I understand that I have a constitutional right to a speedy trial; that pursuant to Pa.R.Crim.P. 600, the Commonwealth must bring my case to trial within 365 days from the filing of the Criminal Complaint, I understand I can ask the Court to dismiss all charges against me. Furthermore, I understand that in the event I am incarcerated on these charges, the Commonwealth must bring my case to trial within 180 days from the date of the filing of the Criminal Complaint. If the Commonwealth fails to do so, I can ask the Court for nominal bail.

I hereby waive (give up) my constitutional rights to a speedy trial from [ENTER DATE] to [ENTER DATE]. I have been advised and I understand that by signing this waiver I am waiving (giving up) right to be tried within 180 days (if in jail) or 365 days (if not in jail) following the filing of the Criminal Complaint against me. No one has made me any promises in return for me signing this waiver. Finally, no one has forced me to sign or coerced me to sign this waiver.

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

## Appendix 2

COMMONWEALTH OF PENNSYLVANIA

v.

: IN THE COURT OF COMMON PLEAS  
: OF ERIE COUNTY, PENNSYLVANIA  
: CRIMINAL DIVISION  
: NO.: \_\_\_\_\_ OF 20 \_\_\_\_\_  
: OTN: \_\_\_\_\_

**APPLICATION FOR DISPOSITION UNDER PROGRAM OF ACCELERATED REHABILITATIVE DISPOSITION/PROBATION  
WITHOUT VERDICT**

Application is hereby made for disposition of this case under the Accelerated Rehabilitative Disposition/Probation Without Verdict Program. To assist the District Attorney's Office in evaluating the suitability of this case for the ARD/PWOV Program, the following information is provided:

**INSTRUCTIONS:** Answer all questions that apply. If a question does not apply, answer it with the initials "N.A"

1. Full Name of the defendant: \_\_\_\_\_

2. Maiden Name of defendant; or other names previously used: \_\_\_\_\_

3. Date of Birth: Social Security Number: \_\_\_\_\_

4. Driver License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_

5. Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (Home) (\_\_\_\_\_) (Work) (\_\_\_\_\_)

6. Previous Addresses and length of time at each (go back 10 years): \_\_\_\_\_

\_\_\_\_\_

7. Present Employment: \_\_\_\_\_

\_\_\_\_\_

8. Education-Schools and Highest Year attained: \_\_\_\_\_

\_\_\_\_\_

9A. Have you ever been found guilty or pleaded guilty or no contest to any criminal violation of any kind in any court other than summary offenses, whether in Pennsylvania or anywhere else? If so, explain giving date, place, charge(s), and disposition:

9B. Do you have any other pending criminal charge(s) or have you ever been placed on ARD or PWOV? If so, explain giving date, place, charges and disposition:

9C. If charged with Driving Under the Influence: Have you ever been adjudicated a delinquent or entered into a co-agreement as a juvenile after being charged with Driving Under the Influence of Alcohol? If so, explain giving details:

\_\_\_\_\_

10. Explanation of your present case, including all details (use reverse side if needed):\_\_\_\_\_

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11. By applying for ARD/PWOV and by signing this application I acknowledge, certify, and understand each of the following rights and responsibilities:

A. I have been advised and I understand that I have a constitutional right to a speedy trial; that pursuant to Pa.R. Crim. P. 600, the Commonwealth must bring my case to trial within 365 days from the date of the filing of the Criminal Complaint charging me. If my case is not brought to trial within 365 days from the filing of the Criminal Complaint, I understand I can ask the Court to dismiss all charges against me. Furthermore, I understand that in the event I am incarcerated on these charges, the Commonwealth must bring my case to trial within 180 days from the date of the filing of the Criminal Complaint, if the Commonwealth fails to do so, I can ask the Court for nominal bail.

I hereby waive (give up) all of my constitutional rights to a speedy trial as set forth from the date my application for ARD is filed until my application is denied or am revoked from the ARD program, should I violate the conditions the Court imposes on me. I have been advised and I understand that by signing this waiver I am waiving (giving up) any and all rights I may have to be tried within 180<sup>th</sup> (if in jail) or 365<sup>th</sup> day following the filing of the Criminal Complaint against me. I am signing the waiver because I understand it is to my benefit to do so and to allow the District Attorney as much time as is reasonably necessary to evaluate my suitability for the ARD Program. I have not been made any promises, nor have I been forced or coerced to sign this waiver.

B. I understand I have the right to be represented by an attorney on my charge(s) and also in connection with my ARD/PWOV Application. If I cannot afford counsel, the Court will provide me free counsel through the Erie County Public Defender's Office.

C. It is my responsibility to notify the District Attorney's Office, in writing, of my arrest and/or conviction for any offense occurring after this Application is made and before it is rejected or I am accepted into the Program by the Court. Failure to comply with this requirement is grounds for refusal of the Application and/or may be treated as a false statement subjecting me to prosecution and/or for removal from the Program.

D. If charged with Driving Under the Influence: I understand that it is my responsibility to arrange for a CRN evaluation. I understand that I cannot be placed in the ARD Program unless such evaluation is completed. I further understand that I am to contact Impaired Driver Services, 1631 Sassafras Street, Erie, Pa 16502 at (814) 454-3326 between 8:00 a.m. and 4:30 p.m. to arrange an appointment.

E. I acknowledge that I have completed (or will complete prior to my ARD hearing) all processing (e.g. Fingerprinting, etc.) required by me. I understand that failure to do so may delay my acceptance into the program.

F. The information I have provided above is true and correct. I understand if I have provided false information on this Application, that reason alone is sufficient to refuse this Application. In addition, I understand that by providing false information I can be prosecuted for offenses including, but not limiting to, perjury, false swearing and/or unsworn falsification to authorities.

DATE: \_\_\_\_\_ DEFENDANT:\_\_\_\_\_

DATE: \_\_\_\_\_ ATTY. FOR DEFENDANT:\_\_\_\_\_

Please Print

DATE: \_\_\_\_\_ WITNESS\*:\_\_\_\_\_

\*When defendant has no attorney

## Appendix 3

COMMONWEALTH OF PENNSYLVANIA : IN THE COURT OF COMMON PLEAS  
: OF ERIE COUNTY, PENNSYLVANIA  
v. : CRIMINAL DIVISION  
: :  
: Docket No.

**ACCELERATED REHABILITATIVE DISPOSITION (ARD) MOTION WITH DEFENSE RESPONSE**

AND NOW, this \_\_\_\_\_ day of \_\_\_\_\_, 2023, the District Attorney of Erie County moves this Honorable Court to consider the entry of the above-named Defendant into the program of Accelerated Rehabilitative Disposition in accordance with the Rules of Criminal Procedure. The District Attorney has investigated the background of this case and of the Defendant and is of the opinion that the best interests of the Defendant and the Community would be served by entry of the Defendant into the program of Accelerated Rehabilitative Disposition.

**COUNT ONE: DUI- GENERAL IMPAIRMENT**  
MANDATORY MINIMUM: \$300/ 6 MONTHS PROBATION  
MAXIMUM: \$300/ 6 MONTHS  
PLUS: \$75 SURCHARGE, \$50 EMSA

**Commonwealth Request:**

**Defense Response to Commonwealth's Motion:**

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By my signature, I understand that the Judge will not be bound by any request by either party when issuing the Final Order admitting the Defendant into the ARD Program.

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Defense Attorney

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Defendant

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Date

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Commonwealth Date

**IMPORTANT**

**IF YOU HAVE BEEN CHARGED WITH A NEW CRIME(S) SINCE YOU FILED YOUR ARD APPLICATION, YOU MAY NO LONGER BE ELIGIBLE FOR ADMISSION INTO THE PROGRAM. YOU MUST NOTIFY THE DISTRICT ATTORNEY'S OFFICE AT 814-451-6349.**

## Appendix 4

**COMMONWEALTH OF PENNSYLVANIA**

v.

: **IN THE COURT OF COMMON PLEAS  
OF ERIE COUNTY, PENNSYLVANIA  
CRIMINAL DIVISION**  
: NO.: \_\_\_\_\_ OF 20 \_\_\_\_\_  
: OTN: \_\_\_\_\_

### **APPLICATION FOR ERIE COUNTY TREATMENT COURT**

Application is hereby made for disposition of this case under the **Erie County Treatment Court Program**. To assist the District Attorney's Office in evaluating the suitability of this case for the Erie County Treatment Program, the following information is provided:

**INSTRUCTIONS:** Answer all questions that apply. If a question does not apply, answer it with the initials N.A.

1. Full Name of the defendant: \_\_\_\_\_
2. Maiden Name of defendant; or other last names previously used: \_\_\_\_\_
  
3. Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_
- Gender (circle one): M/F \_\_\_\_\_
- Race/Ethnicity: \_\_\_\_\_
4. Driver License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_
5. Present Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: (Home) (\_\_\_\_\_) \_\_\_\_\_ (Cell) (\_\_\_\_\_) \_\_\_\_\_  
Email Address: \_\_\_\_\_
6. Present Employment: \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_
7. Next of Kin or Emergency Contact: Name: \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_
8. Education-Schools and Highest Year attained: \_\_\_\_\_
9. Have you served in the Military? \_\_\_\_\_ If so, which branch? \_\_\_\_\_  
Were you honorably discharged? \_\_\_\_\_  
Are you eligible for services through the VA? \_\_\_\_\_  
Are you enrolled in services through the VA? \_\_\_\_\_
10. Do you have any other pending criminal charge(s)? If so, explain giving date, place, charges and disposition:

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11. Are you currently on supervision (probation or parole)? If so, explain whether it is county or state supervised and the name of your probation/parole officer:

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12. Do you have a history of drug/alcohol abuse and/or serious mental illness? If so, give details, including any past treatment you have received (Use reverse side if needed):

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13. Have you ever participated in a Drug Court or any other treatment court in Erie County or any other place? If so, explain which jurisdiction you participated in treatment court and during what time period. Also indicate whether you graduated/successfully completed the program.

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14. **Explanation** of your present case, including all details (use reverse side if needed):

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**NOTE:** The information provided in this section will only be used for the purposes of evaluating this application and will not be used against the defendant in any further criminal proceedings.

PLEASE SUBMIT COPY OF CRIMINAL COMPLAINT OR CRIMINAL INFORMATION WITH THIS APPLICATION.

13. By applying for ECT Program and by signing this application I acknowledge, certify, and understand each of the following rights and responsibilities:

A. I have been advised and I understand that I have a constitutional right to a speedy trial; that pursuant to Pa.R.Crim P. 600 formerly Pa.R.Crim. P. 1100, the Commonwealth must bring my case to trial within 365 days from the filing of the Criminal Complaint, I understand I can ask the Court to dismiss all charges against me. Furthermore, I understand that in the event I am incarcerated on these charges, the Commonwealth must bring my case to trial within 180 days from the date of the filing of the Criminal Complaint, if the Commonwealth fails to do so, I can ask the Court for nominal bail.

I hereby waive (give up) all of my constitutional rights to a speedy trial, as set forth, from the date I file this Application until I either complete the ECT Program or am revoked from it, should I violate the conditions the Court imposes on me. In the event my Application for ECT is denied, I waive (give up) all of my constitutional rights to a speedy trial as set forth, from the date I file this Application until the date my application is denied. I have been advised and I understand that by signing this waiver I am waiving (giving up) any and all rights I may have to be tried within 180 (if in jail) or 365 days following the filing of the Criminal Complaint against me. I am signing the waiver because I understand it is to my benefit to do so and to allow the District Attorney as much time as he needs to evaluate my suitability for the ECT Program. I have not been made any promises, nor have I been forced or coerced to sign this waiver.

- B. I understand I have the right to be represented by an attorney on my charge(s) and also in connection with my ECT Application. If I cannot afford counsel, the Court will provide me free counsel through the Erie County Public Defender's Office.
- C. It is my responsibility to notify the District Attorney's Office, in writing, of my arrest and/or conviction for any offense occurring after this Application is made and before it is rejected or I am accepted into the Program by the Court. Failure to comply with this requirement is grounds for refusal of the Application and/or may be treated as a false statement subjecting me to prosecution and/or for removal from the Program.
- D. I acknowledge that I have completed (or will complete prior to my ECT hearing) all processing (e.g. Fingerprinting, etc.) required of me. I understand that failure to do so may delay my acceptance into the program.
- E. The information I have provided above is true and correct. I understand if I have provided false information on this Application, that reason alone is sufficient to refuse this Application. In addition, I understand that by providing false information I can be prosecuted for offenses including, but not limiting to, perjury, false swearing and/or unsworn falsification to authorities.

DATE: \_\_\_\_\_ DEFENDANT: \_\_\_\_\_

DATE: \_\_\_\_\_ ATTY. FOR DEFENDANT: \_\_\_\_\_  
**Please Print**

Revised: 10/14/15



## Appendix 5

**COMMONWEALTH OF PENNSYLVANIA**

v.

: **IN THE COURT OF COMMON PLEAS  
OF ERIE COUNTY, PENNSYLVANIA  
CRIMINAL DIVISION**  
: NO.: \_\_\_\_\_ OF 20 \_\_\_\_\_  
: OTN: \_\_\_\_\_

**APPLICATION FOR ERIE COUNTY VETERANS COURT**

Application is hereby made for disposition of this case under the **Erie County Veterans Court Program**. To assist the District Attorney's Office in evaluating the suitability of this case for the Erie County Veterans Court, the following information is provided:

**INSTRUCTIONS:** Answer all questions that apply. If a question does not apply, answer it with the initials N.A.

1. Full Name of the defendant: \_\_\_\_\_
2. Maiden Name of defendant; or other last names previously used: \_\_\_\_\_
3. Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Gender (circle one): M/F      Race/Ethnicity: \_\_\_\_\_
4. Driver License Number: \_\_\_\_\_ State Issued: \_\_\_\_\_
5. Present Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: (Home) (\_\_\_\_\_) (Cell) (\_\_\_\_\_)  
Email Address: \_\_\_\_\_
6. Present Employment: \_\_\_\_\_ Work Phone (\_\_\_\_\_)
7. Next of Kin or Emergency Contact: Name: \_\_\_\_\_ Phone (\_\_\_\_\_)
8. Education-Schools and Highest Year attained: \_\_\_\_\_
9. Have you served in the Military? \_\_\_\_\_ If so, which branch? \_\_\_\_\_  
Were you honorably discharged? \_\_\_\_\_  
Are you eligible for services through the VA? \_\_\_\_\_  
Are you enrolled in services through the VA? \_\_\_\_\_

\*\*You are required to submit a copy of your DD Form 214, Certificate of Release or Discharge from Active Duty. **Please forward the DD Form 214 to Matthew Cullen at the District Attorney's Office at the address below.**

Attn: Matthew Cullen  
District Attorney's Office Erie  
County Courthouse  
140 W. 6<sup>th</sup> St., Room 506 Erie,  
PA 16501

The copy of the DD Form 214 will be forwarded to the Veteran's Affairs office and the VA Veteran Justice Officer for verification of eligibility for VA Services. If you do not have your DD Form 214, please contact Cherise Gibbs Pope at the Veteran's Affairs office or, if you were discharged after 2000 you can obtain a copy of your DD Form 214 by visiting [www.ebenefits.va.gov](http://www.ebenefits.va.gov) \*\* NOTE: The copy of the DD Form 214 will only be used for purposes of declaring a candidate's eligibility for VA benefits. If requested, the copy of the DD Form 214 will be returned to the candidate after the application process. Otherwise, the DD Form 214 will be destroyed after a decision has been made regarding the application.

Cherise Gibbs Pope  
Veteran's Affairs  
Erie County Courthouse, Room 101  
140 West 6<sup>th</sup> St., Erie, PA 16501  
Phone: (814) 451-6265

10. Do you have any other pending criminal charge(s)? If so, explain giving date, place, charges and disposition:

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11. Are you currently on supervision (probation or parole)? If so, explain whether it is county or state supervised and the name of your probation/parole officer:

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12. Do you have a history of drug/alcohol abuse and/or serious mental illness treatment? If so, give details. (Use reverse side if needed):

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13. **Explanation** of your present case, including all details (use reverse side if needed):

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**PLEASE SUBMIT COPY OF CRIMINAL COMPLAINT OR THE CRIMINAL INFORMATION WITH THIS APPLICATION.**

13. By applying for Erie County Veterans Court Program ("VTC") and by signing this application I acknowledge, certify, and understand each of the following rights and responsibilities:

A. I have been advised and I understand that I have a constitutional right to a speedy trial; that pursuant to Pa.R.Crim P. 600 formerly Pa.R.Crim. P. 1100, the Commonwealth must bring my case to trial within 365 days from the filing of the Criminal Complaint, I understand I can ask the Court to dismiss all charges against me. Furthermore, I understand that in the event I am incarcerated on these charges, the Commonwealth must bring my case to trial within 180 days from the date of the filing of the Criminal Complaint, if the Commonwealth fails to do so, I can ask the Court for nominal bail.

I hereby waive (give up) all of my constitutional rights to a speedy trial, as set forth, from the date I sign this application until I either complete the VTC Program or am revoked from it, should I violate the conditions the Court imposes on me. In the event my Application for VTC is denied, I waive (give up) all of my constitutional rights to a speedy trial as set forth, from the date I file this Application until the date my application is denied. I have been advised and I understand that by signing this waiver I am waiving (giving up) any and all rights I may have to be tried within 180 (if in jail) or 365 days following the filing of the Criminal Complaint against me. I am signing the waiver because I understand it is to my benefit to do so and to allow the District Attorney as much time as he needs to evaluate my suitability for the VTC Program. I have not been made any promises, nor have I been forced or coerced to sign this waiver.

B. I understand I have the right to be represented by an attorney on my charge(s) and also in connection with my VTC Application. If I cannot afford counsel, the Court will provide me free counsel through the Erie County Public Defender's Office.

C. It is my responsibility to notify the District Attorney's Office, in writing, of my arrest and/or conviction for any offense occurring after this Application is made and before it is rejected or I am accepted into the Program by the Court. Failure to comply with this requirement is grounds for refusal of the Application and/or may be treated as a false statement subjecting me to prosecution and/or for removal from the Program.

D. I acknowledge that I have completed (or will complete prior to my VTC hearing) all processing (e.g. Fingerprinting, etc.) required of me. I understand that failure to do so may delay my acceptance into the program.

E. The information I have provided above is true and correct. I understand if I have provided false information on this Application, that reason alone is sufficient to refuse this Application. In addition, I understand that by providing false information I can be prosecuted for offenses including, but not limiting to, perjury, false swearing and/or unsworn falsification to authorities.

F. By signing this document I authorize the VA to use the information contained in this application to confirm the applicant's eligibility for VA services. **Applicant's Initial:** \_\_\_\_\_

DATE: \_\_\_\_\_ DEFENDANT: \_\_\_\_\_

DATE: \_\_\_\_\_ ATTY. FOR DEFENDANT: \_\_\_\_\_  
**Please Print**

## Appendix 6

IN THE COURT OF COMMON PLEAS, COUNTY OF ERIE, PENNSYLVANIA  
-CRIMINAL DIVISION-

COMMONWEALTH OF PENNSYLVANIA

No. (s) \_\_\_\_\_

vs.

\_\_\_\_\_

**WAIVER OF APPEARANCE AT ARRAIGNMENT**

**I ACKNOWLEDGE THE FOLLOWING:**

1. I understand the nature of the charges at the above docket (s).
2. I understand the rights and requirements contained in paragraph (C) of Pa. R. Crim. P. Rule 571

NOTE: Time limits within which motions must be filed will commence the date of your scheduled arraignment.

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

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_,

after having conferred with counsel of my choice and after having been advised of my right to be arraigned on any and all information (s) in this matter, I hereby waive my right to be so arraigned.

If you have a change in your address, please contact the Criminal Court Administrator's Office at (814) 451-6305.

\_\_\_\_\_

**DEFENDANT**

\_\_\_\_\_

\_\_\_\_\_

**ADDRESS**

\_\_\_\_\_

\_\_\_\_\_

**CITY, STATE, ZIP**

\_\_\_\_\_

\_\_\_\_\_

**TELEPHONE NUMBER**

\_\_\_\_\_

\_\_\_\_\_

**ATTORNEY FOR DEFENDANT**

\_\_\_\_\_

**NOTE:**

Attorneys not members of the Erie County Bar, please provide address and telephone number.

\_\_\_\_\_

\_\_\_\_\_

## Appendix 7

COMMONWEALTH OF PENNSYLVANIA  
v.

[ENTER NAME]

: IN THE COURT OF COMMON PLEAS  
: OF ERIE COUNTY, PENNSYLVANIA  
:  
:  
: Docket No. [ENTER NUMBER]

### **SUBSTITUTION OF COUNSEL**

TO THE CLERK OF COURTS:

Please withdraw my appearance as counsel for the above Defendant.

BY: \_\_\_\_\_  
[ENTER NAME]  
PA ID No. [ENTER NUMBER]  
[ENTER ADDRESS]  
[ENTER PHONE]  
[ENTER E-MAIL]

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

Please enter the appearance of [ENTER NAME] as counsel for the above Defendant.

BY: \_\_\_\_\_  
[ENTER NAME]  
PA ID No. [ENTER NUMBER]  
[ENTER ADDRESS]  
[ENTER TELEPHONE NUMBER]  
[ENTER E-MAIL]

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

#### **CERTIFICATE OF SERVICE**

The undersigned hereby certifies that on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of the within document was served on all counsel of record and unrepresented parties in accordance with the applicable rules of court.

/s/  
Name

#### **CERTIFICATE OF COMPLIANCE**

The undersigned certifies 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.

/s/  
Name

