IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA $\underline{\text{DUI COURT}} - \text{APPLICATION FOR CONTINUANCE}$

I. CASE(S) COMMONWEALTH OF PENNSYLVANIA			CASE NO.	CASE NO.			
vs.							
PROCEEDING SCHEDULED ON:	: DATE/TIME		-	л	JDGE		
TYPE OF PROCEEDING:	ARD HEARING	FOF	RMAL ARRAIG	NMENT	STATUS CONF	ERENCE	
II. NUMBER OF PRIOR CONTINUANCES: BY COMMONWEALTH BY DEFENDANT							
III. APPLICATION IS MADE F	OR THE FOLLOV	VING REA	ASON(S):				
APPLYI	NG PARTY: PRI	NT AND S	IGN		DATE		
DEFENDANT INFORMATION:	DUONE.		EMAI	π.			
EFENDANT INFORMATION: PHONE: EMAIL: TTORNEY INFORMATION: PHONE: EMAIL:							
Sections I through III must be comp to the scheduled court date. If mo address the continuance re	ore than two (2) prior	or DUI Cour continuan	ort Continuance : ces have been gr	must be sub anted, requ	omitted at least 48 businesting party must appe	ar in Court to	
	FO	R COURT	USE ONLY				
IV. COURT STAFF REVIEW:	CRN I	D&A 🗌	TX N/A	COURT S	TAFF INITIALS _		
V. ORDER: AND NOW,							
\square APPLICATION IS GRANTED AND THE CASE IS CONTINUED T					APPLICATION IS DEN		
DATE	TIME	C	OURTROOM				
BY THE COURT:							
		l					
	•••••	•••••	•••••	• • • • • • • •			
For the Clerk of Judicial Records Crimina	al Division:	Signature an	nd Date			_	
Court Administration via email District Attorney via email Probation via email							

COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA CRIMINAL DIVISION

COMMONWEALTH OF PENNSYLVANIA)
VS.) Case No))
WAIVER OF ARRAIGNMI	ENT AND PLEA ELECTION
I,	, Defendant,
following full explanation by my counsel of the	purpose of arraignment under Pennsylvania Rule
of Criminal Procedure 571 and with full under	standing of my rights under that rule, do hereby
voluntarily waive arraignment.	
I hereby, following full consultation wit	h my counsel, indicate my intention to plead not
guilty at this time to the charge(s) filed against a	me. I understand that if I intend to plead guilty or
nolo contendere I may do so in person at my	scheduled arraignment, or at another date to be
scheduled by the Court. I understand that this	waiver does not excuse my presence at Formal
Arraignment unless so permitted by the Court.	
Typed or Printed Name of the Defendant	Signature of the Defendant
Typed or Printed Name of Counsel	Signature of Counsel
Date:	Attorney ID No.: