

IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA  
CIVIL COURT DIVISION

PLAINTIFF

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(address)

\_\_\_\_\_  
(City, State, Zip Code)

File No:

Protection Order

VS

DEFENDANT

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(address)

\_\_\_\_\_  
(City, State, Zip Code)

PETITION TO MODIFY

TO THE HONORABLE, THE JUDGES OF SAID COURT:

The Petitioner, \_\_\_\_\_, respectfully represents that a  
\_\_\_\_\_ Protection Order was entered in this case on \_\_\_\_\_  
and that, for the reasons set forth below, the Petitioner requests to:

- Amend said \_\_\_\_\_ Protection Order as follows:  
\_\_\_\_\_  
\_\_\_\_\_
- Dismiss the Petition and Vacate said Temporary Protection Order.
- Modify the expiration date of the Final Protection Order to \_\_\_\_\_.
- Extend said Final Protection Order.
- Request the return of confiscated weapons.
- Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reasons:

I verify that the statements made in this Petition are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. 4904, relating to unsworn falsification to authorities.

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

\_\_\_\_\_  
Petitioner

## Additional Information

### Plaintiff:

Name: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_

Do you need an Interpreter?  YES  NO

If Yes, What Language: \_\_\_\_\_

List any additional address(es) you are requesting to be protected, such as your place of employment or school. List full address including: Business or School Name (if applicable), Street Address with apartment, floor, suite #, etc., City, State, and Zip Code.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have access to a smart phone or computer with a camera and or microphone and internet access?

YES  NO

Do you have the ability to print an email attachment prior to the scheduled remote interview?

YES  NO

Are you available for video interview or telephone interview during the hours of 8:00 a.m. and 2:00 p.m.?

YES  NO

### Defendant:

Name: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_

Does the Defendant need an Interpreter?  YES  NO

If Yes, What Language: \_\_\_\_\_

Is the Defendant incarcerated?  YES  NO

If Yes, list the Facility name and defendant's inmate number, if known:

\_\_\_\_\_

Does the Defendant have access to a smart phone or computer with a camera and or microphone and internet access?

YES  NO

Does the Defendant have the ability to print an email attachment prior to the scheduled remote interview?

YES  NO

IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA  
FAMILY DIVISION

vs  
Plaintiff )  
                  ) File No.  
                  )  
Defendant )

**TO: THE CLERK OF JUDICIAL RECORDS --- CIVIL DIVISION**

**Praecipe for Self-Representation:**

I, \_\_\_\_\_,  Plaintiff  Defendant,  
represent myself in the within action.

Remove \_\_\_\_\_, Esq., as my attorney of record.

**Address change request:**

Please update the following address for:

Plaintiff  Defendant  Other \_\_\_\_\_

All pleadings and legal papers can be served on me at the address listed below:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

EMAIL: \_\_\_\_\_

**I understand that I am under a continuing obligation to provide current contact information to the court, to other self-represented parties, and to attorneys of record.**

**THE PARTY FILING THIS PRAECIPE MUST PROVIDE NOTICE BY SENDING A COPY TO ALL PARTIES AND ATTORNEYS.**