CUPMD

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

| | |) | NO. | -FC- |
|----|------------|---|-------|------|
| | Plaintiff |) | | |
| VS | |) | CUSTO | DY |
| | |) | | |
| | |) | | |
| | Defendants |) | | |

PETITION FOR MODIFICATION OF A CUSTODY ORDER

| Petitioner is | | | | |
|---|--|--|--|--|
| ☐ Plaintiff ☐ Defendant Address is confidential | | | | |
| □ No | | | | |
| Yes (If yes, you must check one) | | | | |
| Address Confidentiality Program ACP code: | | | | |
| Final PFA Order Case Number: | | | | |
| Respondent is, | | | | |
| ☐ Plaintiff ☐ Defendant residing at | | | | |
| Respondent is, | | | | |
| ☐ Plaintiff ☐ Defendant residing at | | | | |
| The child(ren) and the primary custodian [(have) [(have not) resided in Lehigh County | | | | |
| the last six months. If they have not resided in Lehigh County for the last six months: | | | | |
| a. In what county/state do they live? | | | | |
| b. how long have they lived there? | | | | |

| 5. | Petitioner respectfully represents that on | |
|-----|--|--|
| | an Order of Court was entered for legal and physical custody, a which is attached. | true and correct copy of |
| 6. | The Petitioner resides with the following adult persons: Name | Date of Birth |
| 7. | The Respondent resides with the following adult persons: Name | Date of Birth |
| 8. | The Respondent resides with the following adult persons: Name | Date of Birth |
| 9. | The Order should be modified as follows: (what do you want ch | anged) |
| 40 | | a frança de la companya de la compan |
| 10. | The Order should be modified because: (why do you want the | change) |

| 1. | Petitioner has attached the Criminal Record/Abuse History Verification form required by Pa. R.C.P. No. 1915.3-2 WHEREFORE, Petitioner requests that the Court modify the existing Order because | | | | | | |
|-----|--|-------------------------------|--|--|--|--|--|
| | it will be in the best interest of the child(ren). | | | | | | |
| | | | | | | | |
| | Print Name | | Petitioner Signature | | | | |
| | Phone Number | | - | | | | |
| | I verify that the statem | ents made in th | nis pleading are true and correct. I | | | | |
| | understand that false stat | ements herein | are made subject to the penalties of 18 | | | | |
| | Pa.C.S. Sec. 4904 relating | to unsworn fal | sification to authorities. | | | | |
| | Date | | Petitioner | | | | |
| | CERTIFICATE OF COMPLIANCE | | | | | | |
| | _ | | ions of the Public Access Policy of the Unified | | | | |
| Juc | , . | • | e Appellate and Trial Courts that require filing | | | | |
| cor | ifidential information and docume | ents differently tha | an non-confidential information and documents. | | | | |
| | | Submitted by: | | | | | |
| | | Signature: | | | | | |
| | | Name: | | | | | |
| | | Attorney No. (if applicable): | | | | | |

11