

IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA
CRIMINAL

COMMONWEALTH OF PENNSYLVANIA)
)
 vs.) Docket Number CP-39-
)
)
 Defendant)

Petition for Expungement Pursuant to Pa.R.Crim.P.Rule 320

Defendant, _____, hereby moves the
(Name of Defendant)

Court for an Order of Expungement, and in support thereof, represents as follows:

1. The Defendant's date of birth is _____
2. The Defendant's Social Security Number is _____
3. On _____, the Defendant was charged with
(date of arrest)

(list all charges)

4. At the time of the arrest, the Defendant was photographed, fingerprinted, and a record
of the arrest was made by the _____ Police Department.
5. The Offense Tracking Number (OTN) is _____
6. The Magisterial District Court Number for this case is _____
7. The Magisterial District docket number is _____

8. The Common Pleas docket number is CP-39-_____

9. The charge(s) was disposed by Lehigh County Common Pleas Judge

_____ at the Lehigh County Courthouse located
(Name of Judge)

at 455 West Hamilton Street, Allentown, Pennsylvania.

10. The charge(s) was disposed by the Court in the following manner

Defendant was placed on the ARD Program, and he/she successfully completed the prescribed program and complied with its conditions (Certification attached).

11. There exists no compelling interest or overriding societal interest in retaining and maintaining the aforementioned records, reports, and fingerprints.

12. The presence of these records will be harmful to the Defendant's reputation, and is likely to prejudice his/her employment and education.

WHEREFORE, the Defendant respectfully requests this Honorable Court to order the expungement of all records pertaining to the aforementioned charge(s) under 18 Pa.C.S.A. §9122.

RESPECTFULLY SUBMITTED:

Defendant's Signature

Defendant's Current Address

Defendant's Day Time Phone No.:

VERIFICATION

The undersigned Defendant avers that the statements of fact combined in this Motion for Expungement are true and correct to the best of the Defendant's knowledge, information, and belief, and are made subject to the penalties of 18 Pa.C.S.A. § 4904 relating to unsworn falsification to authorities.

Defendant's Signature

Date

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

Defendant: _____

RE: _____

Case No(s). C P - 3 9 - _____

Certificate of Service

I hereby certify that I am this day serving upon the persons and in the manner indicated below.
The manner of service satisfies the requirements of Pa.R.Crim.P. 575.

Name: _____
(Print Name)

Name: _____
(Signature)

Service by _____ as follows:
(Manner of Service)

Dated: _____

TO: District Attorney's Office
455 West Hamilton Street
Allentown, PA 18101
610 782-3100

(Attorney for Commonwealth – Name, address & phone number)

Service by _____ as follows:
(Manner of Service)

Dated: _____

TO: Court Administration
455 West Hamilton Street
Allentown, PA 18101
610 782-3014

(Court Administrator – Title, address & phone number)