

COUNTY OF



ALLEGHENY

RICH FITZGERALD
COUNTY EXECUTIVE

Dear Attorney/Litigant:

The Department of Court Records will not be assigning court dates to Arbitration matters as per Administrative Order AD-20-000095-PJ which was filed on March 16, 2020. Once the court resumes normal operations and the stay is lifted the Attorney/Litigant will be required to file a "Praecipe to Schedule an Arbitration Date" in order to receive a hearing date.

If you have any questions regarding this matter, please feel free to contact us at (412) 350-5729.

The Department of Court Records
Civil/Family Division

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

Plaintiff(s)

Case Number: --

Vs

Defendant(s)

Praecipe to Schedule Arbitration Hearing

Kindly schedule an arbitration hearing for the above captioned matter for the following date and time: _____, 2020, to begin at 9:00 o'clock a.m. in Courtroom 2, 7th Floor City County Building, 414 Grant St., Pittsburgh Pa. 15219.

The undersigned affirms that he/she will provide the completed Praecipe reflecting the date and time of the hearing along with copies and envelopes addressed to all parties/counsel of record to the Department of court records who shall serve said copies via regular mail and notate the docket as such.

Respectfully submitted:

Date: _____

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

COVER SHEET

Plaintiff(s)	
	Case Number : <input type="text"/> - <input type="text"/> - <input type="text"/>
	Type of pleading :
	Code and Classification : _____
	Filed on behalf of
	(Name of the filing party)
	<input type="checkbox"/> Counsel of Record <input type="checkbox"/> Individual, If Pro Se
	Name, Address and Telephone Number :
	Attorney's State ID : _____
	Attorney's Firm ID : _____
Defendant(s)	Vs

CERTIFICATE OF COMPLIANCE

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Submitted by: _____

Signature: _____

Name: _____

Attorney No. (if applicable): _____