

**IN THE COURT OF COMMON PLEAS OF ALLEGHENY COUNTY, PENNSYLVANIA
FAMILY DIVISION**

_____,
Petitioner

VS.

Case Number: FD _____

_____.
Respondent

COMPLAINT FOR CUSTODY

Filed on Behalf of:

Name: _____

Address: _____

Phone: _____

NOTICE TO DEFEND

You, _____ (respondent), have been sued in court to obtain sole physical custody primary physical custody shared physical custody partial physical custody supervised physical custody sole legal custody shared legal custody of the child(ren). If you fail to appear as provided by this notice, an order for custody be entered against you or the court may issue a warrant for your arrest.

Please see attached Scheduling Order for date and time of your custody proceeding.

You must file with the court a verification regarding any criminal record or abuse history regarding you and anyone living in your household on or before the initial in-person contact with the court but not later than 30 days after service of the complaint or petition.

No party may make a change in the residence of any child which significantly impairs the ability of the other party to exercise custodial rights without first complying with all of the applicable provisions of 23 Pa.C.S. §5337 and P.a.R.C.P. No. 1915.17 regarding relocation.

YOU SHOULD TAKE THIS SET OF PAPERS TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, YOU MAY CONTACT THE OFFICE BELOW TO FIND OUT WHERE YOU CAN RECEIVE LEGAL HELP.

**LAWYER REFERRAL SERVICE
400 Koppers Building
436 Seventh Avenue
PITTSBURGH, PA 15219
(412) 261-5555**

AMERICANS WITH DISABILITIES ACT OF 1990

The Allegheny County Court of Common Pleas Family Division is required, by law, to comply with the Americans with Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the court, please contact our office. All arrangements must be made at least 72 hours prior to any hearing or business before the Family Division. You must attend the scheduled hearing.

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FAMILY DIVISION

_____,
Petitioner

VS.

Case Number: FD _____

_____.
Respondent

COMPLAINT FOR CUSTODY

1. Petitioner's Name: _____ DOB: _____
Residential Address: _____

2. Respondent's Name: _____ DOB: _____
Residential Address: _____

3. Petitioner seeks sole physical custody primary physical custody shared physical custody
 partial physical custody supervised physical custody sole legal custody shared legal
custody of the following child(ren):

Name

Present Residence

Date of Birth

Name	<u>Present Residence</u>	<u>Date of Birth</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

a. The child(ren) (was, were) (was not, were not) (check one) born out of wedlock.

b. The child(ren) (is, are) presently in the custody of _____
(Name)
whose relationship is _____ residing at
_____.

c. During the past five (5) years, the child(ren) (has, have) lived with the following persons at the following addresses:

Name	<u>Address</u>	<u>Dates</u>

d. A parent of the child(ren) is _____ currently residing at _____ (Name)

e. The parent is married divorced single. (check one)

f. A parent of the child(ren) is _____ currently residing at _____ (Name)

g. The parent is married divorced single. (check one)

4. The relationship of Petitioner to the child(ren) is that of _____ .
The Petitioner currently resides with the following persons:

Name	<u>Relationship</u>

5. The relationship of Respondent to the child(ren) is that of _____ .

The Respondent currently resides with the following persons:

<u>Name</u>	<u>Relationship</u>

6. Petitioner has has not participated as a party or witness, or in another capacity, in other litigation concerning the custody of the child(ren) in this or another court.

If yes, the court, term, number and the relationship to this action is:

_____ .

Petitioner has has no information of a custody proceeding concerning the child(ren) pending in a court of this commonwealth,

If yes, the court, term, number and the relationship to this action is:

_____ .

Petitioner knows does not know of a person, not a party to the proceedings, who has physical custody of the child(ren) or claims to have custodial rights with respect to the child(ren).

If yes, the name and address is:

_____ .

7. The best interest and permanent welfare of the child will be served by granting the relief requested because *(set forth facts showing that the granting of the relief requested will be in the best interest of the child(ren))*:

8. Each parent whose parental rights to the child(ren) has/have not been terminated and the person who has physical custody of the child(ren) has been named as party to this action. All other persons, named below, who are known to have or claims a right to custody of the child(ren) have been given notice of the pendency of this action and the right to intervene:

Name	Address	Basis of Claim

9. (a) If the Petitioner is a grandparent who is not in loco parentis to the child and is seeking physical and/or legal custody pursuant to 23 Pa.C.S. §5323, you must plead facts establishing standing pursuant to 23 Pa.C.S. §5324(3).

(b) If the Petitioner is a grandparent or great grand-parent who is seeking partial physical custody or supervised physical custody pursuant to 23 Pa.C.S. §5325, you must plead facts establishing standing pursuant to §5325.

(c) If the Petitioner is a person seeking physical and/or legal custody pursuant to 23 Pa.C.S. §5324(2) as a person who stands in loco parentis to the child, you must plead facts establishing standing.

Indicate below specifically how the parent(s) had the knowledge that you were acting as the child(ren)'s parent and gave you consent to do so. Indicate the length of time that you have been acting as the child(ren)'s parent.

(d) If the Petitioner is a person seeking physical and/or legal custody pursuant to 23 Pa.C.S. §5324(4), you must plead facts establishing standing.

10. I have attached the Criminal Record/Abuse History Verification form required pursuant to Pa.R.C.P.No. 1915.3-1.

WHEREFORE, Petitioner requests this court grant sole physical custody primary physical custody shared physical custody partial physical custody supervised physical custody sole legal custody shared legal custody of the child(ren) to Petitioner.

Petitioner's signature

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

Date

Petitioner's signature

CERTIFICATE OF COMPLIANCE

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

Submitted by: _____

Signature: _____

Name: _____

Attorney No.: _____

(if applicable)