

**IN THE COURT OF COMMON PLEAS OF ALLEGHENY COUNTY, PA  
FAMILY DIVISION – JUVENILE SECTION**

**In the Interest of:**

**DOCKET No.** \_\_\_\_\_

**JID No.** \_\_\_\_\_

**KIDS ID No.** \_\_\_\_\_

\_\_\_\_\_,  
a minor

**CERTIFICATE OF SERVICE  
APPLICATION TO FILE PRIVATE DEPENDENCY PETITION  
PRIVATE DEPENDENCY PETITION**

I certify that \_\_\_\_\_, the \_\_\_\_\_  
(Name of party served) (Relationship to Child)

of the minor child \_\_\_\_\_, was served a true and correct copy of the Application to File a  
(Name of Child)

Private Dependency Petition and Private Dependency Petition pleading in the above-captioned case by the following method:

1.  **CERTIFIED MAIL:** Party was served by pre-paid, certified mail through the U.S. Postal Service on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_. The party or the party's authorized agent signed the green certified mail receipt, which has been returned to me by the postal authorities and is attached as proof of service.

2.  **REGULAR MAIL:** Party was served by First Class postage pre-paid through the U.S. Postal Service on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

3.  **PERSONAL SERVICE:** A competent adult named \_\_\_\_\_, who is over eighteen (18)  
(Name of person serving the pleading)

years old and **not** the applicant/petitioner in this case, served the party by handing him/her a copy of the pleading. The pleading

was served on \_\_\_\_\_, who is the party **or** the party's authorized agent, at the following address  
(Name of person receiving the pleading)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ on the \_\_\_\_\_ day of  
(Street name and number) (City) (State)

\_\_\_\_\_ at approximately \_\_\_\_\_  a.m.  p.m.

4.  **SERVICE ON ATTORNEY OF RECORD:** Party's attorney of record was served the pleading by  personal service  
 regular mail  facsimile on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

I verify that the statements made in this Certificate of Service are true and correct. I understand that any false statements made are subject to the penalties of 18 Pa.C.S. § 4909 relating to unsworn falsification to authorities.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Signature of person who made service