

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

COVER SHEET

Case No:  
vs. Plaintiffs, Type of Pleading:  
**Praecipe to Schedule Arbitration Hearing**  
Defendants. Filed on behalf of:

Counsel of Record

Individual, if *pro se*

Address, Telephone Number and Email Address:

Attorney's State ID:

Attorney's Firm ID:

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

Case No:

vs. Plaintiffs,

,

Defendants.

**PRAECIPE TO SCHEDULE ARBITRATION HEARING**

Kindly schedule an arbitration hearing for the above-captioned matter for the following date: \_\_\_\_\_, to begin at 9:00 A.M. in Courtroom 2, 7<sup>th</sup> Floor, City-County Building, 414 Grant Street, Pittsburgh, PA 15219.

The undersigned affirms that he/she will provide the completed Praecipe to Schedule Arbitration Hearing 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 copies via regular mail and notate the docket as such.

Respectfully submitted:

Date:

\_\_\_\_\_

\_\_\_\_\_  
*Signature*