

**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 file the completed Praecipe to Schedule Arbitration Hearing reflecting the date and time of the hearing with the Department of Court Records and shall serve copies via U.S. First-Class mail to all parties/counsel of record.

Respectfully submitted:

Date: \_\_\_\_\_

*Signature*

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

<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 10px;"></div> Plaintiff(s)  vs.  <div style="border-bottom: 1px solid black; height: 1.2em; margin-top: 20px;"></div> Defendant(s)	CIVIL DIVISION  Case No. _____
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**CERTIFICATE OF SERVICE**

The undersigned certifies that a true and correct copy of the within Praecipe to  
Schedule Arbitration Hearing was served this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_, by U.S. First-Class Mail to the following:

Opposing Party/Opposing Party's counsel  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Additional Party/Counsel (if applicable)  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Additional Party/Counsel (if applicable)  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Additional Party/Counsel (if applicable)  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_