

IN THE COURT OF COMMON PLEAS OF LANCASTER COUNTY, PENNSYLVANIA
**PROTHONOTARY
CIVIL COVER SHEET**

PLEASE LIST NAMES AND ADDRESSES OF ADDITIONAL PARTIES ON A SEPARATE SHEET.

ALL PARTY INFORMATION IS REQUIRED INCLUDING ZIP CODES. ALL PARTY INFORMATION MUST MATCH THE PLEADING. PLEASE DO NOT STAPLE THE COVER SHEET TO THE PLEADING. IF AN EVENT NEEDS TO BE SCHEDULED, A CAO SCHEDULING COVER SHEET MUST ALSO BE ATTACHED.

For Prothonotary Use Only:

DOCKET No: CI -

TYPE OF ACTION:

PARTY INFORMATION

PLAINTIFF'S NAME:

DEFENDANT'S NAME:

ADDRESS:
*If confidential,
use 2nd sheet*

ADDRESS:

MUNICIPALITY:

MUNICIPALITY:

TWP/BOROUGH:

TWP/BOROUGH:

DOB: (mm/dd/yyyy)

TELEPHONE #: (#####)

DOB: (mm/dd/yyyy)

TELEPHONE #: (#####)

FILING ATTORNEY / FILING PARTY INFORMATION

FIRM/OFFICE:

FILING ATTORNEY/PARTY:

AOPC: (Attorney ID) #:

ADDRESS: CITY: STATE: ZIP CODE:

TELEPHONE #: (#####)

EMAIL:

TAX LIEN INFORMATION

MUNICIPALITY:

MAP REFERENCE:

DEED BOOK:

DEED PAGE:

DEED DATE:

SALE PRICE:

TAX YEAR:

TAX LIEN AMOUNT:

PROPERTY DESCRIPTION:

PFA/SVPO/PFI INFORMATION

HEARING DATE:

SOCIAL SECURITY #: (Defendant – Last 4 digits)

POLICE DEPARTMENT:

PREVIOUS PETITIONS: YES NO If 'YES', File Date: