

CONFIDENTIAL

APPLICATION FOR PUBLIC DEFENDER
SUSQUEHANNA COUNTY COURT HOUSE,
PO BOX 218, MONTROSE, PA 18801
(570) 278 - 4600 EXT. 6681
FAX (570) 278 - 7036

WARNING:

SUPPLYING FALSE, MISLEADING OR INCOMPLETE INFORMATION IN ORDER TO SECURE FREE LEGAL REPRESENTATION (TO WHICH YOU ARE NOT ENTITLED), MAY RESULT IN CIVIL AND CRIMINAL LIABILITY.

Personal Information:

1. Last name: _____
First name: _____
2. Date of Birth: _____ Age: _____
3. Address: Street or Box _____
City _____ State: _____ Zip: _____
4. Phone: Home: _____
Work: _____
E-MAIL ADDRESS _____
5. If you are a school student, explain fully:

6. Who do you live with: _____
7. **YOUR** Marital Status: Single / Married / Divorced / Separated
8. Spouse's occupation and employer: _____
9. Spouse's gross pay per week: \$ _____

24. If you own your own home, much is it worth: \$ _____
25. How much do you have left to pay: \$ _____
26. How much do you pay per month in rent: \$ _____

****** IF YOU OWN, OR HAVE AN INTEREST IN, ANYTHING ELSE OF ANY VALUE -- REGARDLESS OF WHAT IT IS OR WHERE IT IS -- EXPLAIN COMPLETELY:** _____

DO NOT LEAVE THIS SECTION BLANK. IT IS VERY IMPORTANT THAT YOU PROVIDE INFORMATION REGARDING YOUR PENDING CHARGES.

27. List all pending charges:

- A) _____ D) _____
- B) _____ E) _____
- C) _____ F) _____

28. If bail has been set, what is the bail amount \$ _____

29. **When is your Preliminary hearing set for:** _____

30. **At What Magistrates:** _____

31. Were any other people charged in this crime **with you**, and who are they: _____

32. Name, address and phone number of any witnesses: _____

In light of my financial condition, I request that the public defender's office represent me free of charge.

Signature: _____ Dated: _____

AFFIDAVIT:

1. I am the applicant for free legal counsel.
2. I am unable to procure sufficient funds to obtain legal counsel.
3. All the information provided in this application is the truth.
4. **I understand that false statements herein may subject me to the civil and criminal penalties outlined in the Public Defender Act.**

Signature: _____ Dated: _____

Failure to sign will result in immediate denial of service!