

**MONTGOMERY COUNTY  
BOARD OF COMMISSIONERS**

VALERIE A. ARKOOSH, MD, MPH, CHAIR  
KENNETH E. LAWRENCE, JR., VICE CHAIR  
JOSEPH C. GALE, COMMISSIONER



**CLERK OF COURTS**

MONTGOMERY COUNTY COURTHOUSE • PO Box 311  
NORRISTOWN, PA 19404-0311

610-278-3346  
FAX: 610-292-2153  
WWW.MONTCOPA.ORG

LORI SCHREIBER  
CLERK OF COURTS

JIMMY DIPLACIDO  
FIRST DEPUTY

NADINE DEANGELIS  
ASSISTANT DEPUTY

MELISSA JENKINS  
ASSISTANT DEPUTY

Docket No. \_\_\_\_\_

**MANDATORY REQUIREMENTS FOR PROPOSED ORDER  
FOR EXPUNGEMENT TO COMPLY WITH  
PENNSYLVANIA RULE OF CRIMINAL PROCEDURE 790**

Checklist for mandatory Requirements for Proposed Order for Expungement:

- Defendant's name (and any alias) and address
- Defendant's date of birth
- Defendant's FULL social security number
- OTN (Offense Tracking Number)
- Court of Common Pleas Docket Number
- Name and address of the Common Pleas Judge
- Specific charges as they appear on the charging documents to be expunged
  - This includes: statutes, description, grades, and disposition of charges
- Arrest Date
- Name of the affiant (means police officer), arresting agency and their address
- Disposition of charges
- All Fines, Costs and Restitution have been paid in full (must be stated in the Order)
- Reason why the defendant is filing for the Expungement
- List the Criminal Justice Agencies to be served with Certified Copies of the Order
- Copy of Pennsylvania State Police Criminal History Report performed within the past 60 days is required, except ARD cases
- If confirmation from the agencies is desired, please include self-addressed stamped envelopes (SASE) for each Certified Copy
- A Filing Fee of \$161.75
- Payment for Certified Copies to be sent to the Agencies @ \$13.00 each
- Other: \_\_\_\_\_

- All payments must be made by Cash or Credit if in person or Attorney check or money order only. **NO** personal checks.
- **Please Note:** The Clerk of Courts Office will serve the Certified Copies to the agencies you listed. However, if you do not include self-addressed stamped envelopes for the notification from the agencies, the Petitioner and/or Attorney will need to follow up with the agencies.
- Please refer to PA Rule of Criminal Procedure 790, Contents for Order of Expungement
  - Upon receipt of a proposed Order containing the information indicated above and required by Rule 790, this Office will process the Petition. Once a court hearing is set (by the defendant or attorney with court administration), or signed Joinder is filed from the District Attorney's office with the Clerk of Courts office, the proposed order will be sent to the Court.
  - If a PA State Police background check is required, please visit <https://epatch.state.pa.us>.
- Brief Instructions for the 790 Petition Expungement Order:
  - 790 Petition and Order for Expungement: can handwrite or type the necessary information or go online to <http://coc.montcopa.org/>
    - Click "Departments" → Click "Judicial" → Click "Clerk of Courts"
    - Click "Forms & Information" → Scroll down to when you see "Expungement Pursuant to Pa.R.Crim.P 790"
    - There will be a link to print out the entire expungement packet.
  - When filing, 4 copies are necessary for filing – One (1) original copy with an original signature plus three (3) copies. (if a Joinder is filed \_\_ you only need an original and one copy)
    - 1 copy is for the District Attorney
    - 1 copy is for Court Administration for a Court Hearing
    - 1 copy is for the Petitioner for their records
    - The Petitioner is responsible for serving the District Attorney and Court Administration a copy for a court hearing.

- Note to Filer: If you wish to receive confirmation of the Expungement from the Agencies, you need to provide self-addressed, stamped envelopes for each Certified Copy you have noted for the Clerk of Courts Office to serve. If you would like any additional Certified Copies to be sent to you, you would need to pay for those in addition to providing a self-addressed stamped envelope for these Certified Copies to be mailed to you.
  
- Any questions please call: Expungement Clerk – 610-278-5956

Legal Questions?

Legal Aid

625 Swede Street  
Norristown, PA 19401  
610-275-5400

Lawyer Referral

610-279-9660

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**Expungement Certified Packets**

	<b>Certified Copies</b>	<b>Copies</b>	<b>Subtotal</b>	<b>Expungement Fee</b>	<b>Expungement Act 5</b>	<b>Total</b>
1 Packet	\$ 11.00	\$ 2.00	\$ 13.00	\$ 29.75	\$ 132.00	\$ 174.75
2 Packets	\$ 22.00	\$ 4.00	\$ 26.00	\$ 29.75	\$ 132.00	\$ 187.75
3 Packets	\$ 33.00	\$ 6.00	\$ 39.00	\$ 29.75	\$ 132.00	\$ 200.75
4 Packets	\$ 44.00	\$ 8.00	\$ 52.00	\$ 29.75	\$ 132.00	\$ 213.75
4 Packets	\$ 55.00	\$ 10.00	\$ 65.00	\$ 29.75	\$ 132.00	\$ 226.75
6 Packets	\$ 66.00	\$ 12.00	\$ 78.00	\$ 29.75	\$ 132.00	\$ 239.75
7 Packets	\$ 77.00	\$ 14.00	\$ 91.00	\$ 29.75	\$ 132.00	\$ 252.75
8 Packets	\$ 88.00	\$ 16.00	\$ 104.00	\$ 29.75	\$ 132.00	\$ 265.75
9 Packets	\$ 99.00	\$ 18.00	\$ 117.00	\$ 29.75	\$ 132.00	\$ 278.75
10 Packets	\$ 110.00	\$ 20.00	\$ 130.00	\$ 29.75	\$ 132.00	\$ 291.75
11 Packets	\$ 121.00	\$ 22.00	\$ 143.00	\$ 29.75	\$ 132.00	\$ 304.75
12 Packets	\$ 132.00	\$ 24.00	\$ 156.00	\$ 29.75	\$ 132.00	\$ 317.75
13 Packets	\$ 143.00	\$ 26.00	\$ 169.00	\$ 29.75	\$ 132.00	\$ 330.75
14 Packets	\$ 154.00	\$ 28.00	\$ 182.00	\$ 29.75	\$ 132.00	\$ 343.75
15 Packets	\$ 165.00	\$ 30.00	\$ 195.00	\$ 29.75	\$ 132.00	\$ 356.75

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**AGENCIES WHICH MAY HAVE RECORDS**

- **Adult Probation & Parole Department** – Attn: Chief Probation Officer, 408 Cherry Street, Norristown, PA 19401
- **District Attorney of Montgomery County** - Attn: Chief Clerk, Court House,, 4<sup>th</sup> Floor, PO Box 311, Norristown, PA 19404-0311
  - **Please Note:** Since the **Montgomery County Detectives Bureau** is part of the **District Attorney's Office**, the **District Attorney's Office** has custody of their files and there is no need to separately serve both entities.
- **DUI Administration** – Attn: Executive Director, 408 Cherry Street, Norristown, PA 19401
- **Magisterial District Justice** – Address is found on the Docket Transcript. A copy of the Docket Transcript must be included.
- **Montgomery County Correctional Facility** –Attn: Warden, 60 Eagleville Road, Eagleville, PA 19403 (if defendant was ever incarcerated for this case).
- **Montgomery County Sheriff's Department** – Attn: Sheriff, Court House, 1<sup>st</sup> Floor, PO Box 311, Norristown, PA 19404-0311
- **PA State Records & Identification Division** – 1800 Elmerton Ave., Harrisburg PA 17109
- **Local Police Department** - Address is found on the Docket Transcript. A copy of the Docket Transcript must be included
- **Prothonotary** – Prothonotary's Office, Montgomery County Court House, 1<sup>st</sup> Floor, P O Box 311, Norristown, PA 19404-0311

**Please Note:** This sheet cannot be used as part of your petition. If you need more space to write out the agencies on the order that you wish to serve, you can attach a separate sheet of paper to attach to your filing.

\*The Clerk of Courts Office cannot tell you or help you in anyway of who you should serve the order of expungement to.\*

- To insure a response from each agency, please enclose self-addressed stamped envelopes.

Commonwealth of Pennsylvania

v.

\_\_\_\_\_

IN THE COURT OF COMMON PLEAS OF  
\_\_\_\_\_ COUNTY,

PENNSYLVANIA

CRIMINAL DIVISION

DOCKET NO: \_\_\_\_\_

---

ORDER

AND NOW, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, after consideration of the  
\_\_\_\_\_ presented by \_\_\_\_\_,  
it is ORDERED that the Petition/Motion is \_\_\_\_\_.

Except as provided by law, all criminal justice agencies upon which this order is served shall expunge and destroy the defendant's arrest record, including the criminal history record information, pertaining to the captioned proceedings.

In accordance with Pa.R.Crim.P. 320, the criminal charges in the above-captioned case specified below are dismissed and the defendant's arrest records regarding these charges shall be expunged except as provided by law.

Except as provided by law, all criminal justice agencies upon which this order is served shall expunge and destroy the official and unofficial arrest and other criminal records pertaining to the captioned proceedings in accordance with Section 119 of The Controlled Substance, Drug, Device and Cosmetic Act (35 P.S. § 780-119).

The information required under Pa.R.Crim.P. 790 appears on the attached page(s) which is hereby incorporated into this ORDER by reference.

BY THE COURT:

\_\_\_\_\_

Pursuant to Pa.R.Crim.P. 790, the following information is provided:

- 1. Petitioner Name: \_\_\_\_\_
- 2. Alias(es): \_\_\_\_\_
- 3. Petitioner's Address: \_\_\_\_\_
- 4. Petitioner's Date of Birth: \_\_\_\_\_
- 5. Petitioner's Social Security Number: \_\_\_\_\_

6. Name and address of the judge of the Court of Common Pleas or Philadelphia Municipal Court who accepted the guilty plea or heard the case:

7. Name and mailing address of the affiant as shown on the complaint, if available:

8. Docket Number: \_\_\_\_\_

9. Offense Tracking Number (OTN): \_\_\_\_\_

10. The date on the complaint, or the date of arrest, and if available, the criminal justice agency that made the arrest:

11. The specific charges, as they appear on the charging document, to be expunged and applicable dispositions (attach additional sheets if needed):

12. If the sentence includes a fine, costs, or restitution, whether the amount due has been paid: \_\_\_\_\_

13. The reason for expungement:

14. The criminal justice agencies upon which certified copies of the order shall be served:





**Petition for Expungement Pursuant to Pa.R.Crim.P. 790**

AND NOW, the petitioner avers the following and requests that this petition for expungement pursuant to Pa.R.Crim.P. 790 be granted for the reasons set forth below.

PETITIONER INFORMATION						
Full Name:		DOB:		Social Security Number:		
Address:		Alias(es):				
CASE INFORMATION						
List name, address of the Judge of the Court of Common Pleas or Philadelphia Municipal Court who accepted the guilty plea or heard the case:						
Judge:			Address:			
Philadelphia Municipal Court or Court of Common Pleas Docket Number:			Offense Tracking Number (OTN):			
Name of Arresting Agency:			Date of Arrest:		Date on Complaint:	
List name and mailing address of the affiant as shown on the complaint, if available:						
Name of Affiant:			Address:			
List specific charges, as they appear on the charging document, to be expunged and the disposition of each charge (please attach additional sheet(s) of paper if necessary):						
PA Statute (Title)	Section	Subsection	Statute Description	Counts	Grade	Disposition
If the sentence imposed included a fine, costs or restitution, has the amount due been paid? <input type="checkbox"/> Yes <input type="checkbox"/> No						
List the reason(s) for the expungement (please attach additional sheet(s) of paper if necessary):						
<input type="checkbox"/> I have attached a copy of my Pennsylvania State Police Criminal History which I have obtained within 60 days before filing this petition.						
<input type="checkbox"/> I have not attached a copy of my Pennsylvania State Police Criminal History. State reason(s) below:						

When this petition is filed with the Clerk of Courts, the petitioner shall serve a copy upon the attorney for the Commonwealth.

I, the undersigned petitioner, avers that the facts set forth in this petition are true and correct to the best of my personal knowledge or information and belief, and are made subject to the penalties of unsworn falsification to authorities under 18 Pa.C.S § 4904.

\_\_\_\_\_  
 Signature of Petitioner

\_\_\_\_\_  
 Date