

**In the Court of Common Pleas, Montgomery County,
Pennsylvania, Criminal Division**

IN RE: : **MD-**
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PETITION FOR CONSTABLE APPOINTMENT (Township)

I, _____, petition the Court for my appointment as a Pennsylvania State Constable in the _____ Township of _____, Montgomery County.

I currently reside at _____ in the Township of _____, Montgomery County and certify that this is my primary residence. I am a member of the _____ party and am a qualified elector in the Township where I currently reside.

I certify that a vacancy exists in the Township where I am applying. The last person to hold said constable position was _____. That person is no longer a constable in the _____ Township where I am applying because (check reason):

- Death- proof in the form of a Death Certificate is attached.
 Resignation- proof in the form of a copy of the resignation is attached.
 Removal from Office- proof in the form of a Court Order is attached.
 Failure to Assume Office- Clerk of Courts confirmation that no Oath of Office is on file.
 Vacancy- office is vacant and proof in the form of a certification from a local official is attached.
 Other- _____ - appropriate proof is attached.

Furthermore, I understand that in order to complete my application and have it considered by the Court, I MUST include the following documents as attachments to the petition:

- 1) The signatures and addresses of ten qualified electors who reside within the borough in which I seek appointment;
- 2) A criminal background check from all fifty states, including child and sexual abuse checks;

- 3) A statement from the Police Chief of the Township attesting to my credibility and good standing in the community; and
- 4) Proof of vacancy.

Finally, I understand that by submitting this application I agree to abide by all rules and regulations relating to constables as issued by the Montgomery County Court of Common Pleas, the Montgomery County Clerk of Courts, and the Montgomery County District Attorney.

SIGNATURE: _____

DATE: _____

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MD-

LIST OF QUALIFIED ELECTORS IN TOWNSHIP

Name of Elector	Signature	Address

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ATTACHMENTS AND VERIFICATION

I hereby certify that the following attachments have been included in this application:

- 1) The signatures and addresses of at least ten qualified electors who reside within the Township in which I seek appointment;
- 2) A criminal background check from all fifty states, including child and sexual abuse checks;
- 3) A statement from the Police Chief of the Township attesting to my credibility and good standing in the community; and
- 4) Proof of vacancy.

By signing this petition I agree to all the terms and conditions as set forth in the application, including abiding by all rules and regulations relating to constables as issued by the Montgomery County Court of Common Pleas, the Montgomery County Clerk of Courts, and the Montgomery County District Attorney.

I verify that the signatures and addresses of the qualified electors in my application are true and correct to the best of my knowledge and belief, and are valid electors in the Township where I reside.

I verify that the information contained in this application and the attachments are true and correct to the best of my knowledge and belief and understand that any false statements I make are subject to 18 Pa.C.S.A. 4101 (relating to sworn falsification).

SIGNATURE: _____

DATE: _____

Sworn and Subscribed
Before me, this _____,
Day of _____, 20_____.

4 Initials of Applicant: _____

**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
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LORI SCHREIBER
CLERK OF COURTS

JIMMY DIPLACIDO
FIRST DEPUTY

NADINE DEANGELIS
ASSISTANT DEPUTY

MELISSA JENKINS
ASSISTANT DEPUTY

VITAL STATISTICS

1. NAME _____

2. CURRENT ADDRESS _____

3. PHONE NUMBER _____

4. EMAIL ADDRESS _____

5. SOCIAL SECURITY # _____

6. DATE OF BIRTH _____

7. WEIGHT _____

8. HEIGHT _____

9. HAIR COLOR _____

10. EYE COLOR _____

11. SPECIAL PHYSICAL CHARACTERISTICS (SCARS, TATOOS, ETC.) _____
