

4. Plaintiff is seeking: **(check one)** shared legal custody sole legal custody

5. Plaintiff is seeking: **(check one)** partial physical custody primary physical custody

shared physical custody supervised physical custody

6. The name(s) of the child(ren) is/are:

<u>Name</u>	<u>Current Address</u>	<u>Date of Birth</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. The child(ren) were born out of wedlock YES OR NO

8. The child(ren) is/are presently in the custody of _____(name),
who resides at _____
(Street) (City) (State)

9. During the past five years, the child(ren) has/have resided with the following person(s) and at the following addresses:

<u>List all Persons</u>	<u>List all Addresses</u>	<u>Dates</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. The mother of the child(ren) is _____, currently residing at _____.

11. She is currently: (married) (divorced) (single).

12. The father of the child(ren) is _____, currently residing at _____.

13. He is currently: (married) (divorced) (single).

14. The relationship of plaintiff to the child(ren) is that of _____.

15. The plaintiff currently resides with the following persons:

<u>Name</u>	<u>Relationship</u>
_____	_____
_____	_____
_____	_____

16. The relationship of defendant to the child(ren) is that of _____.

17. The defendant currently resides with the following persons:

<u>Name</u>	<u>Relationship</u>
_____	_____
_____	_____
_____	_____

18. Plaintiff (has) (has not) participated as a party or witness, or in another capacity, in other litigation concerning the custody of the child(ren) in this or another court. If other litigation has occurred list the county court, term and case number, and its relationship to this action is: _____.

19. Plaintiff (has) (has not) information of a custody proceeding concerning the child(ren) pending in a court of this Commonwealth. If other litigation has occurred list the county court, term and case number, and its relationship to this action is:

_____.

20. Plaintiff (knows) (does not know) of a person not a party to the proceedings who has physical custody of the child(ren) or claims to have custodial rights with respect

to the child(ren). If there is another person list the name and address of such person:

_____, _____
(address)

21. The best interest and permanent welfare of the child(ren) will be served by granting the relief requested because (set forth facts showing why granting of this petition is in the **best interest** and **permanent welfare** of the **child(ren)**).

22. Each parent whose parental rights to the child(ren) have not been terminated and the person who has physical custody of the child(ren) **MUST** been named as parties to this action.

All other persons, named below, who are known to have or claim a right to custody of the child(ren) have been given notice of the pendency of this action and the right to intervene:

<u>Name</u>	<u>Address</u>	<u>Basis of Claim</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

23. (a) If the plaintiff is a grandparent who is seeking physical and/or legal custody pursuant to 23 Pa.C.C. Section 5324, you must plead facts establishing standing pursuant to 23 Pa.C.S. Section 5324(3).

(b) If the plaintiff is a grandparent or great-grandparent who is seeking partial physical custody or supervised physical custody pursuant to 23 Pa.C.S. Section 5325, you must plead facts establishing standing pursuant to Pa.C.S. Section 5325.

24. Plaintiff has attached the Criminal Record/Abuse History Verification form required pursuant to Pa. R.C.P. No. 1915.3-2. **I UNDERSTAND THAT FAILURE TO DO SO WILL RESULT IN THIS ACTION BEING DISMISSED.**

WHEREFORE, Plaintiff requests the court to grant:

shared legal custody OR sole legal custody;

And

partial physical custody primary physical custody shared physical custody supervised physical custody

of the child(ren).

NOTE: You must serve a copy of the Complaint for Custody on each person listed above or in accordance with Pa.R.C.P. No. 1930.4, **AND**, further, you **MUST** provide **proof of service** for each opposing party to Child Custody Services.

Plaintiff or Attorney Signature

Plaintiff or Attorney Name (print)

_____ (Address)

_____ (Address)

_____ (Telephone)

VERIFICATION

I verify that the statements made in this Complaint are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.

Plaintiff's signature

Date: _____