	CIVIL	ACTION - LAW			
		:			
PLAIN	ITIFF(s)	: : No			
	v.	: IN CUSTODY			
DEFEN	NDANT(s)	: : :			
	PETITION FOR	EMERGENCY CUSTODY			
1.	Petitioner is	and lives at			
	with cell phone number:				
	and email address:				
	and relationship to child				
2.	Respondent is	and lives at			
	with cell phone number:				
	and email address:				
	and relationship to child				
3.		ent are not the natural parent of the child, provide			
	the following information:				
	a. Parent #1 name:				
		s:			

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	e.	Parent	#2 name:			
	f.	Parent	ent mailing/home address:			
	g.	Parent	cell phone number:			
	h.	Parent	email address:			
4.	. Full name and date of birth of child(ren):					
	a.					
	b.					
	C.					
	d.					
	e.					
5.	Who cu	urrently	/ has custody of the child(ren)?			
	a. If not Petitioner or Respondent:					
		i.	Custodian name:			
		ii.	Custodian mailing/home address:			
		iii.	Custodian cell phone number:			
		iv.	Custodian email address:			
		v.	Custodian relationship to child(ren):			
		vi.	How long has child(ren) been living with custodian?			
6.	Is there	e a curr	ent Delaware County custody order for the child(ren)?YESNO			

a. If no, are you filing a Custody Complaint with this Emergency Petition?

____YES____NO

7. An emergency hearing is necessary because child(ren) is/are facing imminent physical injury and/or emergency threat to safety, health and wellbeing, as follows:

a.	
b.	
C.	
d.	
e.	
f.	
8. Is there	e a current Children & Youth Services investigation?YESNO
a.	If yes, what is the CYS caseworker name and phone #?
b.	Is there a Temporary or Final PFA Order currently in effect?YESNO
9. Are cri	minal charges pending against any person named above?YESNO
a.	If yes, which person, in what county/state and what are the charges?
	Petitioner respectfully requests that this Honorable Court grant this Emergency ward the following emergency relief:

DATE: ______

PETITIONER SIGNATURE

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

DATE: _____

PETITIONER SIGNATURE

AFFIDAVIT OF SERVICE/GOOD FAITH EFFORT

(Failure to serve this Emergency Petition may result in delay in processing and/or scheduling)				
l,	, Petitioner, hereby certify, subject to the penalties of			
Pa.C.S.A. 4904 relating to	unsworn falsification to authorities, the f	ollowing:		
I have served n	otice on Respondent	of the		
attached Petition For Emo	ergency Custody by the following method	:		
Personal service/h	nand delivery on date:	at address:		
	l return receipt on date:	to		
address:				
I have made the	e following good faith attempts to serve n	otice of the Petition on the		
Respondent	and have bee	n unable to serve the		
Petition:				
DATE:				
	PETITIONER SIGNATUR	RE		