

# APPEALING EVICTION SELF-HELP KIT

#### **REMEMBER**

The Law often changes. Each case is different. This self-help kit is meant to give you general information, not specific legal advice.

## You Can Appeal an Eviction Judgment

While getting an eviction judgment is scary, there are actions you can take to help you stay in your home. One way is to appeal. There are five steps you have to take when appealing an eviction.

### **FIVE STEPS!**

- 1) You must fill out the **APPEAL FORMS** and deliver them to the Prothonotary's office, within **10** days of the date of the judgment, along with the Notice of Judgment.
- 2) You may be able to avoid paying a filing fee by filing a **REQUEST TO WAIVE THE FILING FEE**, which is called an "in forma pauperis" petition.
- 3) If you want to stay in your home during the appeal process, you have to pay rent to the Court. **YOU MUST PAY TO STAY!** This can not be waived. (See the details on page 3)
- 4) You must **SERVE THE APPEAL** by hand-delivering it or sending it by certified mail to the landlord and the Magisterial District Judge who entered the judgment.
- 5) You must then file **PROOF OF SERVICE** within **10** days of filing the appeal.



## You Must Pay to Stay!

#### **STAY OF EVICTION (SUPERSEDEAS):**

A supersedeas, also called a stay of eviction, is the court's way of saying that the landlord cannot go forward with the eviction until the appeal is over.

In order to obtain a stay of eviction when you owe rent, you have two options:

1. If you can afford it, you must pay either the entire judgment or three months of rent, whichever is less, to the Court when you file the appeal.

OR

- 2. If you cannot afford to pay the whole judgment or three months of rent to the Court with the appeal, then:
  - a. Complete a **TENANTS AFFIDAVIT** saying you cannot pay the whole judgment or three months of rent to the Court.
  - b. Pay **ONE-THIRD** of your monthly rent to the Court at the time you file the appeal;
  - c. Pay the remaining **TWO-THIRDS** of your monthly rent to the court within 20 days of the date the appeal was filed;
  - d. Continue to pay your **FULL MONTHLY RENT** to the court every 30 days from the date the appeal was filed until your trial. (This 30-day deadline is only 10 days after the 20-day deadline above. In other words, you MUST pay two full months of rent within the first 30 days.)

If you miss a payment or pay late (even by one day) the Court might lift the stay of eviction/supersedeas, and you will be forced to move out while the appeal is pending!

## **Documents Needed to File the Appeal**

- I. Notice of Appeal (attached)
- 2. Judgment
- 3. **Tenant's Affidavit** (if you can only afford 1/3 rent) there are two different affidavits attached, one for people who receive section 8 assistance and the other for those who do not.
- 4. **Fee waiver petition** ("IFP," attached)
- 5. Certificate of Compliance (attached)

The Prothonotary will stamp your documents and return them to you. DO NOT LEAVE without the Prothonotary's signature in the SUPERSEDEAS box. This signature allows you to remain in your home.



### **After You File**

#### **SERVICE:**

You must give the Notice of Appeal to the Magisterial District Judge (who entered the judgment) AND your landlord so they know that the eviction is on hold. If you file the appeal on the last day, it is very important that the Magisterial District Judge receive it that same day.

There are **ONLY TWO** ways to legally serve the Notice of Appeal:

- 1. You may **HAND DELIVER** the Notice of Appeal to an adult at the person's home or business.
- 2. You can mail the Notice of Appeal by CERTIFIED MAIL\*.

#### **FILING PROOF OF SERVICE:**

Within 10 days of filing the appeal, you must complete and file the Proof of Service form with the Court.

\* If you served the appeal by certified mail, attach the white receipt to the proof of service form. You should not wait for the return receipt (green card) to come back.





If your landlord is giving you trouble, or you have questions about this packet in general, please reach out to us here at North Penn Legal Services. We are happy to help!

#### Address:

Penn Tower 25 W. Third Street, Suite 400 Williamsport, PA 17701

Application Hotline: I-877-953- 4250 (I-877-9-LEGAL-0)

#### Phone:

(570) 323-8741 (800) 326-7436 (toll free)

#### Fax:

(570) 323-5256

#### Web:

www.northpennlegal.org

#### COMMONWEALTH OF PENNSYLVANIA

**COURT OF COMMON PLEAS** 

Judicial District, County Of

# NOTICE OF APPEAL FROM

#### MAGISTERIAL DISTRICT JUDGE JUDGMENT

**COMMON PLEAS No.** 

#### **NOTICE OF APPEAL**

Notice is given that the appellant has filed in the above Court of Common Pleas an appeal from the judgment rendered by the Magisterial District Judge on the date and in the case referenced below.

NAME OF APPELLANT		MAG. DIST. NO.		NAME OF MDJ	
ADDRESS OF APPELLANT		CITY		STATE	ZIP CODE
DATE OF JUDGMENT	IN THE CASE OF (Plaintiff)			(Defendanţ)	
DOCKET No.		5	SIGNATURE OF APPE	ELLANT OR ATTORNEY OR AGENT	
R.C.P.M.D.J. No. 1008. This Notice of Appeal, wh	ONLY when this notation is requented by the Magisterial Die EAS to the judgment for possession	strict Judge, will	action before	vas Claimant (see Pa. R.C.P.M.D.J. a Magisterial District Judge, A COM twenty (20) days after filing the NOTICE	PLAINT MUST BE
	Signature of Prothonotary or Dep	outy			
•	e. IF NOT USED, detach from co		•	P.M.D.J. No. 1001(7) in action befored upon appellee.  appellee(s), to file a complain	
	Name of appelle	ee(s)			
(Common Pleas No.	)	within twenty (20	)) days after se	ervice of rule or suffer entry of judgme	ent of non pros.
				Signature of appellant of	r attorney or agent
<b>RULE</b> : To	Name of appellee(s)	, appell	ee(s)		
	that a rule is hereby entered upoersonal service or by certified or		omplaint in this	appeal within twenty (20) days after	the date of service
(2) If you do not file	a complaint within this time, a JU	JDGMENT OF N	ON PROS MA	Y BE ENTERED AGAINST YOU.	
(3) The date of serv	vice of this rule if service was by	mail is the date o	f the mailing.		
Date:,	20				

YOU MUST INCLUDE A COPY OF THE NOTICE OF JUDGMENT/TRANSCRIPT FORM WITH THIS NOTICE OF APPEAL. The appellee and the magisterial district judge in whose office the judgment was rendered must be served with a copy of this Notice pursuant to Pa.R.C.P.M.D.J. 1005(A).

COURT OF COMMON PLEAS	PLAINTIFF:	NAME and ADDRESS	
County Of	ľ		•
			1
	DEFENDANT:	VS. NAME and ADDRESS	
	DEI ENDANT.	NAINE AND ADDRESS	
	'		•
	L		
	Common Pleas	Docket No.	
	L		
1.221.01.007.111.10	Pa.R.C.P.M.D.J. No.	1008C(2)	
I,	J Pa.R.C.P.M.D.J. No.	(print name and address	s here),
I,ave filed a notice of appeal from a magisterial dis		(print name and address	,
I,ave filed a notice of appeal from a magisterial dis	strict court judgment av	(print name and address	ossession
I,	strict court judgment av	(print name and address varding to my landlord po	ossession times my
I,	strict court judgment avne financial ability to pa	(print name and address varding to my landlord por y the lesser of three (3) to court. My total household	cimes my
I,	strict court judgment avene financial ability to pathe the magisterial district supplemental instruction	(print name and address varding to my landlord por y the lesser of three (3) to court. My total household ons for obtaining a stay p	cimes my d income
l,	strict court judgment avene financial ability to pathe the magisterial district supplemental instruction	(print name and address varding to my landlord por y the lesser of three (3) to court. My total household ons for obtaining a stay p	cimes my d income
I,ave filed a notice of appeal from a magisterial distributed freal property that I occupy, and I do not have the nonthly rent or the judgment for rent awarded by oes not exceed the income limits set forth in the ppeal and I have completed an in forma pauperis	strict court judgment avene financial ability to pathe magisterial district supplemental instructions (IFP) affidavit to verify	(print name and address varding to my landlord por y the lesser of three (3) to court. My total household ons for obtaining a stay por y this. I have/have not (co	ossession times my d income pending ross out the
I,ave filed a notice of appeal from a magisterial distinction of the property that I occupy, and I do not have the nonthly rent or the judgment for rent awarded by oes not exceed the income limits set forth in the ppeal and I have completed an in forma pauperisme that does not apply) paid the rent this month.	strict court judgment aver the magisterial district supplemental instructions (IFP) affidavit to verify idavit are true and corrections.	(print name and address varding to my landlord porty the lesser of three (3) to court. My total household ons for obtaining a stay porty this. I have/have not (court to the best of my known and the court to the best of my known and address to the sect to the best of my known and address to the best of my known and ad	ossession times my d income pending ross out the

SIGNATURE OF TENANT

Date

COMMONWEALTH OF PENNSYLVANIA	PLAINTIFF:	NAME and ADDDESS	
COURT OF COMMON PLEAS	PLAINTIFF:	NAME and ADDRESS	
County Of			
	DEFENDANT:	VS. NAME and ADDRESS	
	Common Pleas	Docket No.	
SECTION 8 TENANT'S FILED PURSUANT TO I			
I,		(print name and ad	ldress here
have filed a notice of appeal from a magisterial distr	rict court judgment av	arding my landlord pos	session of
real property that I occupy, and I do not have the fin	nancial ability to pay t	ne lesser of three (3) time	nes my
monthly rent or the actual rent in arrears. My total h	ousehold income doe	s not exceed the incom	e limits set
orth in the supplemental instructions for obtaining a	a stay pending appea	and I have completed	an in forma
pauperis (IFP) affidavit to verify this. I have/have no	t (cross out the one t	nat does not apply) paid	the rent
this month.			
The total amount of monthly rent that I perso	nally pay to the landle	ord is \$ I hereby	certify that
I am a participant in the Section 8 program and I an	n not subject to a fina	(i.e., non-appealable)	decision of
court or government agency which terminates my ri	ght to receive Section	n 8 assistance based on	n my failure
to comply with program rules.			
I verify that the statements made in this affida	avit are true and corre	ect to the best of my kno	owledge,
nformation and belief. I understand that false stater	ments herein are mad	le subject to the penaltic	es of
18 Pa.C.S. § 4904, relating to unsworn falsification	to authorities.		
Date SIGNATURE OF	TENANT		

Plaintiff			IMON PLEAS OF NTY, PENNSYLVANIA
vs.	: : NO.		
Defendant	: : CIVIL A :	CTION - LAW	
	ORDER TO PROCEED PAYMENT OF FEES A	-	
AND NOW, this	day of	, 20	_, upon consideration of
the within Petition, it is herel	by ordered that the Petition	oner be permitted	to proceed in this matter
without payment of fees and	costs.		
	BY THE	COURT,	

Plaintiff			, : IN THE COURT OF COMMON PLEAS OF : COUNTY, PENNSYLVANIA	
/S.			: NO.	
			: , : CIVIL ACTION - LAW	
Defendant			· :	
		· · · · · · · · · · · · · · · · · · ·	TITION TO PROCEED WITHOUT YMENT OF FEES AND COSTS	
1.	I am	the Plaintiff/	Defendant (circle one) in the above matter and because of m	y
financial con	dition, a	am unable to	pay the fees and costs of prosecuting or defending the action of	r
proceeding.				
2.	I am	unable to obt	tain funds from anyone, including my family and associates, t	О
pay the costs	of litiga	ation.		
3.	I repr	resent that the	e information below relating to my ability to pay the fees an	d
costs is true a	and corr	ect.		
	(a)	Name:		
		Address: _		
		-		
	(b)	<u>Employme</u>	<u>ent</u>	
		If you are p	presently employed, state:	

Employer:
Employer's Address:
Salary or wages per month:
Type of work:
If you are presently unemployed, state:
Date of last employment:
Salary or wages per month:
Type of work:
Other income within the past twelve months
Business or profession:
Other self-employment:
Interest:
Dividends:
Pension and Annuities:
Social Security benefits:

(c)

	Support Payments:
	Disability Payments:
	Unemployment Compensation:
	Supplemental Benefits:
	Workman's Compensation:
	Public Assistance:
	Other:
(d)	Other contributions to household support
	Spouse's Name:
	Spouse's Employer:
	Spouse's Salary or wages per month:
	Spouse's Type of work:
	Contributions from children:
	Contributions from your parents:
	Other contributions:
(e)	Property Owned
	Cash:

	Checking account:
	Savings account:
	Certificates of deposit:
	Real Estate (including home):
	Motor vehicle: Make: Year:
	Cost: Amount Owed:
	Stocks; Bonds:
	Other:
(f)	<u>Debts and Obligations</u>
	Mortgage:
	Rent:
	Loans:
	Other:
(g)	Persons dependent upon you for support
	Spouse's Name:
	Children (initials only): Age:
	Age:

	Age:
	Age:
	Other Persons (if children, initials only):
	Relationship:
	Relationship:
4.	I understand that I have a continuing obligation to inform the Court of
improvemen	at in my financial circumstances which would permit me to pay the costs incurred
herein.	
5.	I verify that the statements made in this affidavit are true and correct. I understand
that false sta	tements herein are made subject to the penalties of 18 Pa. C.S. § 4904, relating to
unsworn fals	sification to authorities.
Date	Signature

Plaintiff,	: IN THE COURT OF COMMON PLEAS OF :COUNTY, PENNSYLVANIA
vs.	: : NO. :
Defendant ,	: CIVIL ACTION - LAW :
<u>CERTIFIC.</u>	ATE OF COMPLIANCE
I certify that this filing complies w	with the provisions of the Public Access Policy of the
Unified Judicial System of Pennsylvania:	Case Records of the Appellate and Trial Courts that
require filing confidential information and	d documents differently than non-confidential
information and documents.	
Name:	
Signature:	

#### PROOF OF SERVICE OF NOTICE OF APPEAL AND RULE TO FILE COMPLAINT

(This proof of service must be filed within 10 days after filing of the notice of appeal)

I hereby certify that I served the Notice of Appeal, Common PI	eas No,
upon the Magisterial District Judge designated therein on	, by
personal service, or	
certified or registered mail, sender's receipt attached h	ereto,
and upon the appellee,, on,	, by
personal service, or	
certified or registered mail, sender's receipt attached h	ereto,
I verify that the statements herein are true and correct. I under made subject to the penalties of Section 4904 of the Crimes C unsworn falsification to authorities	
By:	
Name	Signature
Date:	