



APPLICATION FOR ADMITTANCE TO THE LYCOMING COUNTY COURTHOUSE, WITH CELL PHONE AND/OR ELECTRONIC RECORDING DEVICE

Lycoming County Courthouse
Court Administrator's Office
48 West Third Street
Williamsport, PA 17701

Phone: 570-327-2436
Fax: 570-327-2293
E-mail: eferguson@lyco.org

Please fill out the below information and return it to the Court Administrator's Office. When contacted to pick up your pass, please bring your Driver's License and Attorney ID (if applicable).

(Please Print - if your information is illegible we cannot process your request.)

Name : _____
First Last

Firm / Company Name/ or Reason For Request): _____

Occupation/ Position (if applicable): _____

Business Address: _____

Daytime Phone: _____

* If this is a renewal, please indicate Badge # _____ and Expiration Date _____

Cell Phone: _____

Email: _____

Signature

Date

For Court Personnel Only

Application Approved or Denied (please circle)

Date Received: _____

DL #: _____ State: _____

Court Administrator's or Judge's Signature

Attorney ID #: _____ (if applicable)

Date pass given to bearer: _____

Badge Number: _____

Initials: _____

Exp. Date: _____
2yrs from date of issue - business only