



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: 570-327-2243
Fax: 570-327-2293
E-mail: khitchens@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: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

\* If this is a renewal, please indicate:
Badge # \_\_\_\_\_
and
Expiration Date \_\_\_\_\_

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