

**FILING A CIVIL COMPLAINT**  
**IN THE COURT OF COMMON PLEAS**

**(NOTE – the form included in this Self-Help kit is a “skeleton” form – it does not provide any advice on what information you need to include in your Complaint, other than the names and addresses of the parties, and should not be relied upon as a guide as to what information is necessary to file an effective Complaint. If you have any questions about what you should include in your Complaint, please seek the advice of an attorney.)**

1. Fill out a Complaint form.
  - a. Near the top of the first page, write your name in the space above the word “Plaintiff”. (You are the Plaintiff.)
  - b. Leave the space after the word “No.” blank; this is where the Prothonotary will place the docket number when you file the complaint.
  - c. Write the name of the person you are filing the Complaint against above the word “Defendant”. (This person is the Defendant.)
  - d. In Paragraph 1, write your name and address.
  - e. In Paragraph 2, write the Defendant’s name and address.
  - f. In numbered paragraphs, beginning with Number 3, write the facts which entitle you to the relief you are asking for. Put a separate fact or set of related facts in each numbered paragraph and number them as you go along. Attach additional sheets of paper as necessary.
  - g. After the words “Wherefore, Plaintiff requests this Court”, write the relief you are seeking.
  - h. Sign on the line next to the word “Signature”. Write your address and phone number where indicated.

- i. Read and sign the verification on the second page, on the line above the words “signature of Plaintiff”. Write the date in the space to the left of your signature.
    - j. Attach a copy of any contract which gives rise to your claim (if applicable) to the back of the Complaint.
  2. Fill out a Notice to Defend.
    - a. Near the top of the first page, write your name in the space above the word “Plaintiff”. (You are the Plaintiff.)
    - b. Leave the space after the word “No.” blank; this is where the Prothonotary will place the docket number when you file the complaint.
    - c. Write the name of the person you are filing the Complaint against above the word “Defendant”. (This person is the Defendant.)
    - d. At the bottom, write the date and then sign on the line above the word “signature”. Then write your name, address and phone number as indicated.
    - e. Attach this Notice to Defend to the front of the Complaint.
  3. Fill out a Civil Cover Sheet.
    - a. Write “Lycoming” before the word “County” in the top left corner.
    - b. Check the box for “Complaint” in the first part of Section A, under “Commencement of Action”.
    - c. Write your name where it says “Lead Plaintiff’s Name”.
    - d. Write the name of the person you are filing the Complaint against where it says “Lead Defendant’s name”.
    - e. Check “YES” or “NO” after “Are money damages requested?” depending on whether or not you are asking for money damages. Write the dollar amount or leave it blank if you are not asking for money damages.
    - f. Check “NO” after “Is this a Class Action Suit?”
    - g. Check “YES” or “NO” after “Is this an MDJ Appeal?” depending on whether you are filing the Complaint following an appeal of a judgment issued by a Magisterial District Judge (“YES”) or you are filing the Complaint originally in Common Pleas Court (“NO”).

- h. Check the box where it says “Check here if you have no attorney (are a self-represented [Pro Se] Litigant)”.
  - i. In Section B, check the box which describes the type of case you are filing. Note – even if you are filing the Complaint as part of an appeal from a Magisterial District Judge judgment, it is NOT a “Civil Appeal”, so do not check a box in that section. If it is a landlord/tenant matter, check the box in the “Real Property” section for “Landlord/Tenant Dispute”. If you are seeking money you say is owed to you by the Defendant for reasons other than those arising from a residential lease, check the box in the “Contract” section for “Debt Collection: Other”. If you are seeking the return of an item of personal property, check the box in the “Miscellaneous” section for “Replevin”.
4. Fill out a Monitoring Notice.
- a. Near the top of the first page, write your name in the space above the word “Plaintiff”. (You are the Plaintiff.)
  - b. Leave the space after the word “No.” blank; this is where the Prothonotary will place the docket number when you file the complaint.
  - c. Write the name of the person you are filing the Complaint against above the word “Defendant”. (This person is the Defendant.)
  - d. In Part I, place a check-mark on the line before “General Civil Case”. If the amount in controversy is less than \$50,000, check the line before the word “arbitration”. If it is more than \$50,000, check the line before the words “Normal Track” if it is a complicated matter, or “Fast Track” if it is a simple matter.
  - e. In Part II, check “Yes” or “No” to indicate whether you are demanding a jury trial. (Note – to demand a jury trial you must also make this demand on the face of your complaint by writing “Jury Trial Demanded” in the caption under the words “Civil Action – Law”. Also note that demanding a jury trial does not necessarily entitle you to one; whether a claim can be heard by a jury is governed by statute.

If you have any questions about whether you are entitled to a jury trial, please seek the advice of an attorney.)

- f. In Part III, note any scheduling concerns (like an upcoming vacation or out-of-town travel. Note: the pre-trial conference and trial will not be scheduled within the following few months so only address issues that might arise at least four months after the filing of the Complaint.)
  - g. At the bottom, where it says “Name of filing counsel or pro se party”, write your name , address, telephone number and email address as indicated. (After the word “for” you need not write anything; this is for an attorney to designate the name of the client.)
  - h. At the bottom, where it says “Name of opposing counsel or pro se party”, write the Defendant’s name, address, telephone number and email address as indicated. If you don’t know the phone number or email address, leave those blank. (You can leave it blank after the word “for”, this space is for an attorney to designate the name of the client.)
5. Make three copies of the Notice to Defend and Complaint (including the verification), one copy of the Civil Cover Sheet and one copy of the Monitoring Notice. (If the case started in Magisterial District Court and your Complaint is being filed as part of an appeal from that judgment, you need to make only two copies of the Notice to Defend and Complaint, including the verification.)
  6. Take all of the documents to the Prothonotary for filing (at 48 West Third Street, Williamsport, PA 17701). You will have to pay a filing fee of \$146.25 (as of January 2021) unless you also file a Petition to Waive Fees and Costs. (Ask for a separate form for that at the Law Library if you are eligible.)
  7. The Prothonotary will file-stamp all documents and return the copies to you.
  8. If the case started in Magisterial District Court and your Complaint is being filed as part of an appeal from that judgment, you may mail one of the file-stamped copies of the Complaint by regular mail to the Defendant at the address provided in the magisterial

district court proceedings, or you may hand the Defendant a file-stamped copy. You must then complete and file a Certificate of Service.

9. If you are filing the Complaint originally in Common Pleas Court, under Pennsylvania law, service of the Complaint on a resident of Pennsylvania must be made by the Sheriff. You must take two file-stamped copies (the Defendant's copy and the Sheriff's service copy) of the Complaint to the Sheriff for service. You will have to pay a deposit of \$100 for service of the Complaint by the Sheriff. You also must provide the Sheriff with the following information, you can just write it on a piece of paper: Your name and address and telephone number, and the Defendant's name and address (home and work, if you know it), and telephone number. You should write the words "Please serve" in front of the Defendant's name. Write the docket number of the case at the top. Once the Defendant is served with a copy of the Complaint, the Sheriff will file a Return of Service that shows the date and manner of service. As long as you have provided your name and phone number, they will call you to let you know service has been made, and also to let you know if there is money left from the deposit which can be returned to you.
10. The Defendant must file a response to the Complaint within twenty (20) days after being served. If no response is filed in that time, you may seek a default judgment by mailing to the Defendant a 10-day Notice of Default. Keep a copy of this Notice as you will need it later.
11. If no response is filed within ten (10) days after the Defendant receives the Notice of Default, you may file a Praecipe for Default Judgment. Attach a copy of the 10-day Notice of Default to the Praecipe. This is filed with the Prothonotary. There is a filing fee of \$25.75. The Prothonotary will enter a judgment by default. If the amount of damages can be determined from the Complaint, that will be included in the judgment. If not, or if the request for relief is not for money damages, you will have to ask for a hearing on damages or other relief, by filing a Praecipe for Hearing on Damages.

12. If the Defendant does file an Answer to the Complaint, you will receive a Scheduling Order from the court. This Order will provide for a period of discovery (exchange of information) and set a date and time for a pre-trial conference. Following that pre-trial conference you will get a date and time for trial.
13. If you and the Defendant resolve the matter at any time during the process *before* the court holds a trial, you should file a Praecipe to Settle, Discontinue and End so the court knows there is no need for further proceedings.



WHEREFORE, Plaintiff requests this Court \_\_\_\_\_

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Respectfully submitted,

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

**VERIFICATION**

I, \_\_\_\_\_, state that I am the Plaintiff in the foregoing matter and that the facts set forth in the foregoing Complaint are true and correct to the best of my knowledge, information and belief. I further understand that false statements made herein are subject to the penalties of 18 Pa.C.S. Section 4904, relating to unsworn falsification to authorities.

Date: \_\_\_\_\_

\_\_\_\_\_  
(signature of Plaintiff)

Plaintiff				:	IN THE COURT OF COMMON PLEAS OF
				:	LYCOMING COUNTY, PENNSYLVANIA
vs.				:	
				:	CIVIL ACTION - LAW
				:	
				:	
Defendant				:	NO.

**NOTICE TO DEFEND AND CLAIM RIGHTS**

You have been sued in court. If you wish to defend against the claims set forth in the following pages, you must take action within twenty (20) days after this complaint and notice are served, by entering a written appearance personally or by attorney and filing in writing with the court your defenses or objections to the claims set forth against you. You are warned that if you fail to do so the case may proceed without you and a judgment may be entered against you by the court without further notice for any money claimed in the complaint or for any other claim or relief requested by the plaintiff. You may lose money or property or other rights important to you.

**YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER.**

**IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.**

Pennsylvania Bar Association  
 Lawyer Referral Service  
 100 South Street (P.O. Box 186)  
 Harrisburg, PA 17108  
 (800) 692-7375

**AMERICANS WITH DISABILITIES ACT OF 1990**

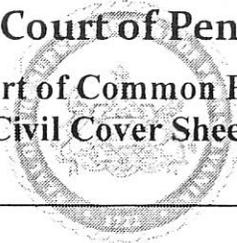
The Court of Common Pleas of Lycoming County is required by law to comply with the Americans With Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the Court, please contact the office of the Lycoming County Court Administrator, Lycoming County Courthouse, 48 West Third Street, Williamsport, PA 17701, Telephone No. (570) 327-2330. All arrangements must be made at least 72 hours prior to any hearing or business before the Court. You must attend the scheduled conference or hearing.

Date: \_\_\_\_\_

\_\_\_\_\_  
 (signature)  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_

# Supreme Court of Pennsylvania

## Court of Common Pleas Civil Cover Sheet



County \_\_\_\_\_

*For Prothonotary Use Only:*

Docket No: \_\_\_\_\_

TAKE STAMP

The information collected on this form is used solely for court administration purposes. This form does not supplement or replace the filing and service of pleadings or other papers as required by law or rules of court.

SECTION A

**Commencement of Action:**

- Complaint       Writ of Summons       Petition  
 Transfer from Another Jurisdiction       Declaration of Taking

Lead Plaintiff's Name: \_\_\_\_\_

Lead Defendant's Name: \_\_\_\_\_

Are money damages requested?  Yes  No

Dollar Amount Requested:  within arbitration limits  
 outside arbitration limits  
 (check one)

Is this a *Class Action Suit*?  Yes  No

Is this an *MDJ Appeal*?  Yes  No

Name of Plaintiff/Appellant's Attorney: \_\_\_\_\_

Check here if you have no attorney (are a Self-Represented [Pro Se] Litigant)

SECTION B

**Nature of the Case:** Place an "X" to the left of the **ONE** case category that most accurately describes your **PRIMARY CASE**. If you are making more than one type of claim, check the one that you consider most important.

**TORT** (do not include Mass Tort)

- Intentional  
 Malicious Prosecution  
 Motor Vehicle  
 Nuisance  
 Premises Liability  
 Product Liability (does not include mass tort)  
 Slander/Libel/ Defamation  
 Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**CONTRACT** (do not include Judgments)

- Buyer Plaintiff  
 Debt Collection: Credit Card  
 Debt Collection: Other  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Employment Dispute: Discrimination  
 Employment Dispute: Other  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Other:  
 \_\_\_\_\_  
 \_\_\_\_\_

**CIVIL APPEALS**

- Administrative Agencies  
 Board of Assessment  
 Board of Elections  
 Dept. of Transportation  
 Statutory Appeal: Other  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Zoning Board  
 Other:  
 \_\_\_\_\_  
 \_\_\_\_\_

**MASS TORT**

- Asbestos  
 Tobacco  
 Toxic Tort - DES  
 Toxic Tort - Implant  
 Toxic Waste  
 Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**REAL PROPERTY**

- Ejectment  
 Eminent Domain/Condemnation  
 Ground Rent  
 Landlord/Tenant Dispute  
 Mortgage Foreclosure: Residential  
 Mortgage Foreclosure: Commercial  
 Partition  
 Quiet Title  
 Other:  
 \_\_\_\_\_  
 \_\_\_\_\_

**MISCELLANEOUS**

- Common Law/Statutory Arbitration  
 Declaratory Judgment  
 Mandamus  
 Non-Domestic Relations Restraining Order  
 Quo Warranto  
 Replevin  
 Other:  
 \_\_\_\_\_  
 \_\_\_\_\_

**PROFESSIONAL LIABILITY**

- Dental  
 Legal  
 Medical  
 Other Professional:  
 \_\_\_\_\_  
 \_\_\_\_\_

**COURT OF COMMON PLEAS, LYCOMING COUNTY, PENNSYLVANIA  
CASE MONITORING NOTICE**

\_\_\_\_\_  
Plaintiff  
vs.  
\_\_\_\_\_  
Defendant

:  
: DOCKET NO: \_\_\_\_\_  
:  
: CIVIL ACTION  
:

I. This matter is:

\_\_\_\_\_ **Mortgage Foreclosure** (file once an **Answer** has been filed).  
Time needed for trial \_\_\_\_ (1 day) \_\_\_\_ (1/2 day).

\_\_\_\_\_ **Credit Card Collection Case** (file once an **Answer** has been filed)  
a) \_\_\_\_ Arbitration. (\$50,000 or less) Time needed for discovery? \_\_\_\_ months  
b) \_\_\_\_ Trial. Time needed for discovery? \_\_\_\_ months

\_\_\_\_\_ **Forfeiture** (file once an **Answer** has been filed)

\_\_\_\_\_ **Administrative Agency Appeal** (file with **Notice of Appeal**)

\_\_\_\_\_ **General Civil Case** (file with **Complaint**):  
a) \_\_\_\_ Arbitration. (\$50,000 or less) Time needed for discovery? \_\_\_\_ months  
b) \_\_\_\_ Fast track (4 month discovery period)  
c) \_\_\_\_ Normal track (9 month discovery period)  
d) \_\_\_\_ Complex track (12 month discovery period)  
e) \_\_\_\_ Medical Malpractice (14 month discovery period)

\_\_\_\_\_ **Other.** Action requested: \_\_\_\_\_

II. Jury trial demanded? \_\_\_\_ YES \_\_\_\_ NO

III. Please note any special scheduling concerns: \_\_\_\_\_  
\_\_\_\_\_

Name of filing counsel or pro se party: \_\_\_\_\_ for \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

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

Opposing counsel or pro se party: \_\_\_\_\_ for \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

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

IN THE COURT OF COMMON PLEAS OF LYCOMING COUNTY, PENNSYLVANIA

\_\_\_\_\_, : NO.  
Plaintiff :  
vs. : CIVIL ACTION - LAW  
\_\_\_\_\_ :  
Defendant :

**CERTIFICATE OF SERVICE**

I, \_\_\_\_\_, Plaintiff in this matter, certify that a copy of the Notice to Defend and Complaint filed on \_\_\_\_\_ was sent to \_\_\_\_\_, Defendant, at:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

by \_\_\_\_\_ first class mail on \_\_\_\_\_  
\_\_\_\_\_ other: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

IN THE COURT OF COMMON PLEAS OF LYCOMING COUNTY, PENNSYLVANIA  
CIVIL DIVISION

Plaintiff  
vs. File No. \_\_\_\_\_  
Defendant

To: \_\_\_\_\_  
Defendant  
Date of Notice: \_\_\_\_\_

**IMPORTANT NOTICE**  
Pursuant to Pa.R.C.P. No. 237.1(a)(2)

YOU ARE IN DEFAULT BECAUSE YOU HAVE FAILED TO ENTER A WRITTEN APPEARANCE PERSONALLY OR BY ATTORNEY AND FILE IN WRITING WITH THE COURT YOUR DEFENSES OR OBJECTIONS TO THE CLAIMS SET FORTH AGAINST YOU. UNLESS YOU ACT WITHIN TEN (10) DAYS FROM THE DATE OF THIS NOTICE, A JUDGMENT MAY BE ENTERED AGAINST YOU WITHOUT A HEARING AND YOU MAY LOSE YOUR PROPERTY OR OTHER IMPORTANT RIGHTS.  
YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER.  
IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
TELEPHONE NO. \_\_\_\_\_

Signature: \_\_\_\_\_  
Signature of Plaintiff or Atty.  
Attorney for: \_\_\_\_\_  
Supreme Court ID No.: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.: \_\_\_\_\_

IN THE COURT OF COMMON PLEAS OF LYCOMING COUNTY, PENNSYLVANIA

CIVIL DIVISION

VS

:  
:  
:  
:  
:  
:  
:

File No. \_\_\_\_\_

PRAECIPE FOR JUDGMENT

Enter Judgment in favor of Plaintiff / Defendant and against:

\_\_\_\_\_ for want of \_\_\_\_\_.

(  ) Assess damages as follows:

Debt-----	\$ _____
Interest from _____	_____
Attorney's Commission -----	_____
TOTAL -----	\$ _____

(  ) I certify that the foregoing assessment of damages is for specified amounts alleged to be due in the complaint and is calculable as a sum certain from the complaint.

(  ) Pursuant to Pa.R.C.P. No. 237 (notice of praecipe for final judgment or decree), I certify that a copy of this praecipe has been mailed to each other party who has appeared in the action or to his or her Attorney of Record.

(  ) Pursuant to Pa.R.C.P. No. 237.1, I certify that written notice of the intention to file this praecipe was mailed or delivered to the party against whom judgment is to be entered and to his or her Attorney of Record, if any, after the default occurred and at least ten (10) days prior to the date of the filing of this praecipe and a copy of the notice is attached.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Attorney for: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Supreme Court ID No.: \_\_\_\_\_

NOW, \_\_\_\_\_, \_\_\_\_\_, JUDGMENT IS ENTERED AS ABOVE.

\_\_\_\_\_  
Prothonotary/Clerk, Civil Division

by: \_\_\_\_\_

Deputy

IN THE COURT OF COMMON PLEAS OF LYCOMING COUNTY, PENNSYLVANIA

\_\_\_\_\_  
Plaintiff  
vs.  
\_\_\_\_\_  
Defendant

: NO. \_\_\_\_\_  
:  
:  
:  
:  
:

**PRAECIPE FOR HEARING ON DAMAGES**

To the Court:

A default judgment was entered in this matter on \_\_\_\_\_. Please schedule a hearing on damages/relief requested.

Signature: \_\_\_\_\_  
(Plaintiff)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

IN THE COURT OF COMMON PLEAS OF LYCOMING COUNTY, PENNSYLVANIA

\_\_\_\_\_  
Plaintiff  
vs.  
\_\_\_\_\_  
Defendant

: NO. \_\_\_\_\_  
:  
:  
:  
:  
:

**PRAECIPE TO SETTLE & DISCONTINUE**

To the Prothonotary:

Kindly mark the above-entitled matter as settled and discontinued with prejudice.

Signature: \_\_\_\_\_  
(Plaintiff)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_