



OFFICE OF THE PUBLIC DEFENDER OF JEFFERSON COUNTY, PENNSYLVANIA

Jefferson County Courthouse, 200 Main Street, Brookville, PA 15825
814-849-1520 (Phone) Email: pd@jeffersoncountypa.com

\*\*\* Open Monday-Friday from 8:30 am to Noon \*\*\*

APPLICATION FOR LEGAL REPRESENTATION

Please print your answers to all questions clearly and legibly. If your writing is so bad that we cannot understand it, your application WILL be denied!

Name: (First) (Middle) (Last)
Birthdate: (M)ale or (F)emale: Telephone Number:
Social Security Number: - - Email Address:
Marital Status (circle one): Single Married Separated Divorced Widow(er)
Home Address: Street City State Zip

Are you in jail/prison now? Date you were jailed:
If you are presently incarcerated, which jail or prison are you at now?
Are you presently on state parole or on county probation?
If yes, list each county you report to:
Are you presently jailed because you allegedly violated parole or probation?

I require legal representation for the following matter(s): (check all that apply)
New Criminal Charge Parole/Probation Violation PFA Violation
Criminal Contempt [Failure to Pay] Other:

What crime(s) are you charged with:
List anyone else you believe was arrested or charged along with you:

Did you give the police a written or oral confession? \_\_\_\_\_

Have you already had your preliminary hearing? \_\_\_\_\_

If you've not already had your preliminary hearing, where will it be held: *(circle one)*:

Punxsutawney (Mizerock)    Brookville (Bazylak)    Reynoldsville (Inzana)

If you have any prior convictions in PA or in any other state, please list them here to the best of your recollection. Mark juvenile offenses with a "J". *Please be honest as the DA will eventually disclose your multi-state rap sheet to us anyway. If we know the extent of your record now, we can give you more accurate advice much earlier during the course of this case.*

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At any time prior to today, has any other attorney represented you *in the matter you are now seeking representation for*? \_\_\_\_\_ If yes, who represented you: \_\_\_\_\_

### **Additional Contact Information**

Please provide the name, address and telephone number(s) of at least one person **with a stable residence** who will always know how to reach you in case you move, lose your cell phone, etc. When you provide this alternate contact information, you do consent to this office contacting you there by mail and by telephone.

***Please do not leave this section blank. This information may help to avoid a warrant for your arrest based on failure to attend a court function you didn't know about because you moved!***

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Name	Address	Phone
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Name	Address	Phone
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## Financial and Assets

**VEHICLES:** List all vehicles where your name is on the title, either by yourself or with others. The term “vehicles” includes cars, trucks, ATVs, motorcycles, snowmobiles, airplanes and boats. List the year, make/model where indicated. If you own the vehicle jointly with another person, list his or her name and relationship to you. If you still owe money on the vehicle, please provide the approximate payoff amount. ***DO NOT LEAVE ANY SECTION BLANK!***

Year	Make and Model	Joint Owner Info	Money still owed (\$)
Year	Make and Model	Joint Owner Info	Money still owed (\$)
Year	Make and Model	Joint Owner Info	Money still owed (\$)
Year	Make and Model	Joint Owner Info	Money still owed (\$)

**REAL ESTATE:** Is your name on a deed to any land, house, camp, garage or other building in this state or any other? If so, please provide the address of the property as well as the name(s) of any other persons who are also named on the deed. If the property is mortgaged, please provide the approximate payoff amount.

Address	Joint Owner Info	Money still owed (\$)
Address	Joint Owner Info	Money still owed (\$)

**DEPOSIT ACCOUNTS:** Do you own, either alone or jointly with any other person, a deposit account? The term “deposit account” includes, but is not limited to, savings and checking accounts, IRAs, brokerage accounts, certificates of deposit (CDs), pension accounts, digital currencies, Paypal or Venmo account balances, etc. If so, please provide the type of account and the approximate current balance. Where yourself and others jointly own the account, please list the name and relationship to you of the other owner(s).

Account Description/Type	Joint Owner Info	Approximate Balance (\$)
Account Description/Type	Joint Owner Info	Approximate Balance (\$)
Account Description/Type	Joint Owner Info	Approximate Balance (\$)
Account Description/Type	Joint Owner Info	Approximate Balance (\$)

YOUR JOB: Current or most recent employer: \_\_\_\_\_

What is your most recent hourly wage or monthly salary? \_\_\_\_\_

Do you still work there? \_\_\_\_\_

If not, when and why did you stop working there? \_\_\_\_\_

If you worked anywhere else in the last year, what was your wage/salary and why did you stop working there?: \_\_\_\_\_

SPOUSE'S JOB: If you're married and if your spouse works, what is his/her hourly wage or monthly salary? \_\_\_\_\_

OTHER INCOME: If you receive any other income (such as Social Security, Cash Assistance, pension or annuity distribution, other retirement benefits, worker's compensation, unemployment compensation, or child support, please indicate the total monthly amount here: \$ \_\_\_\_\_

**For both you and your spouse (if applicable) you must include copies of pay stubs from your last 6 weeks of employment OR copies of the most recent W-2 or 1099-M form(s) you filed with last year's state or federal income tax return.**

**For "Other Income" (above) you must include proof of the amount you receive each month.**

**Your application will not be processed if this information is missing!**

**IMPORTANT! ..... IF YOU HAVE NO JOB, HAVE NO ASSETS AND RECEIVE NO INCOME OR BENEFITS FROM ANY SOURCE, YOU MUST PROVIDE US WITH A WRITTEN STATEMENT DESCRIBING HOW YOU SURVIVE WITH NO OBVIOUS MEANS OF SUPPORTING YOURSELF. A SIMPLE EXPLANATION WILL SUFFICE.**

Were you claimed as a dependent on any person's federal income tax return last year? \_\_\_\_\_

If so *please provide a copy of that person's federal income tax return* for the last year. Note that this copy must be signed by the person(s) who filed the return.

How many people reside with you at home? \_\_\_\_\_

Please list their names and their relationship to you:

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

If any of the people you just named is your child, please list the monthly amount of any income that child receives (Social Security benefits, trust distribution, etc): \$ \_\_\_\_\_

Note that the information you provided will be matched against both the income guidelines published from time to time by the federal government AND against the prevailing Chapter 7 federal Bankruptcy Code's asset exemption amounts for real estate, vehicles, jewelry, household items and tools of trade as applied in Pennsylvania. Your application will be denied if you and your family income exceeds 125% of the poverty income guidelines OR if the net asset values of you or your family exceed that which you may protect through a Chapter 7 bankruptcy by more than \$2,500.00.

**Acceptance of Reduced Income Representation Program Fee If I'm Not Eligible for Free Representation**

**The Jefferson County Commissioners have authorized the creation of the Reduced Income Representation program for those persons with income or assets that exceed our approval guidelines by not more than 25%. For a one-time assessment of \$400, such persons will be assigned public defender representation on all current case(s) until a withdrawal of appearance is filed at the conclusion of each case. The \$400 does NOT need to be paid in advance and will be assessed as a cost that may be paid over time after the case concludes.**

**In the event my income/assets exceed Jefferson County's public defender guidelines by less than 25%, I wish to be considered for the Reduced Income Representation program. If I qualify for this program, I understand a one-time \$400 fee will be assessed as a cost to not more than one of my pending case(s):**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

If you have intentionally quit your job, transferred assets to another person within six (6) months of your application date, or if you pledged assets as security for a loan for the purpose of qualifying for representation, your application will be denied.

If your application is denied, you have the right to appeal our decision by writing to the Jefferson County Court Administrator (200 Main Street, Brookville, PA 15825) with the reasons you feel our decision is in error. The Court Administrator will accept your written appeal and schedule a hearing before the President Judge.

# Verification and Acceptance of Additional Terms

I verify that my statements and answers included in the foregoing Application for Legal Representation (and any written explanation I submit with the same), are true and correct to the best of my knowledge, information and belief. I further understand that these statements and answers are made subject to the penalties provided at 18 Pa.C.S.A. §4904 relating to Unsworn Falsification to Authorities.

I understand that I am required to notify the Office of the Public Defender of Jefferson County of any change in: (1) my income or that of any member of my household; and (2) my telephone number or address within 48 hours of that change. I further understand that my failure to report income changes to that office, in writing, may result in the termination of my legal representation and/or civil or criminal actions against me to recover the reasonable value of attorney fees extended on my behalf and/or the costs of investigators, expert witnesses and court fees relating to my case.

I further understand that the Office of the Public Defender of Jefferson County may ask third parties about various financial and residential information I have provided in this application, and my signature below authorizes that office to do so whenever it deems the same to be warranted.

I further acknowledge that I have reviewed, understand and accept all additional terms and conditions relating to representation by the Office of the Public Defender of Jefferson County that are set forth in the Instructions and Additional Terms pages I received with this application.

Failure to sign and date this page will result in the automatic denial of this application.

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Date

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Signature

## Instructions and Additional Terms

This document includes important and helpful information relating to legal representation by the Jefferson County Office of the Public Defender. You may keep or discard these pages, but do not return them with your application!

### The Application Itself

1. Answer all questions asked and leave no areas blank.
2. Attach proof of your income. *(if you are in jail, have someone else get this information to our office)*. If you have no income or assets, be sure to attach a written explanation describing how you eat, sleep and live with no means of support.
3. If possible, attach a copy of your criminal complaint or other paperwork that shows us what you are charged with and the circumstances of that incident. We may not have access to the details of your charges at the time you apply.
5. Be sure to sign and date the last page of the application.
6. Applications must be received at the Public Defender Office not less than five (5) business days prior to your scheduled court appearance. "Late" applications are still processed for approval, but may enter your case at a point beyond your next scheduled court event.

You may submit your completed application and any supplemental documents to the Public Defender Office in any of the following ways: by depositing the same into the gray drop box in the entry lobby at the Jefferson County Courthouse (ask the on-duty deputy sheriff if you cannot locate the box); by mail addressed to the address at the top of the application; or by scanning to our email address: [pd@jeffersoncountypa.com](mailto:pd@jeffersoncountypa.com).

### Eligibility Determination

1. In order to receive the legal services offered by this Office you must meet certain eligibility requirements relating to household income and assets. These requirements are based on federal income guidelines and US Bankruptcy Court exemptions. Mere difficulty in hiring your own attorney does NOT grant you the right to a free attorney, nor does the fact you are presently in jail.
2. It is your responsibility to ensure that this application is complete and accurate; this office is not responsible for providing legal counsel at any stage of your criminal proceeding until your application is complete and you have received a letter confirming you have been assigned an attorney.
3. If you wish to be considered for the Jefferson County Commissioners' Reduced Income Representation Program (in the event you do not qualify for free representation under our operating guidelines), be sure to sign and date where indicated on Page 5.

4. Pennsylvania's Public Defender Act does not provide for free criminal defense in all types of cases! In general, summary and traffic offenses are not covered by the Act unless they are filed in conjunction with other felony and misdemeanor charges. One exception to this rule relates to instances where the district judge feels he or she may place you in jail or on probation if you are found guilty. If you wish to be considered for representation in a case involving only summary or traffic offenses, please have the district judge who will hear your case sign a paper certifying that you may be jailed or placed on probation in the event of conviction, and submit that paper with your application.
5. If you receive additional criminal charges while you are actively represented by this office on an existing case you do NOT need to file an additional application for the new charge. You DO need to let us know of your new charges, however. No other office in the court system will tell us you have new charges - that's on you.

#### Contacting Your Attorney

1. The Office of the Public Defender of Jefferson County has sole authority to assign an attorney to your case(s). You DO NOT have the right to an attorney of your choice, and you may be assigned one or more different attorneys at various stages of your case.
2. All contact with your attorney MUST take place through the Public Defender Office at the courthouse. The office contact information is as follows:

Phone: 814-849-1520

Email: [pd@jeffersoncountypa.com](mailto:pd@jeffersoncountypa.com)

Mail: Jefferson County Public Defender, 200 Main Street, Brookville, PA 15825

**DO NOT CONTACT OR VISIT YOUR ATTORNEY AT HIS OR HER HOME OR PRIVATE OFFICE REGARDING YOUR CASE, AND DO NOT ASK OR PERMIT YOUR FAMILY, FRIENDS AND OTHER INTERESTED PERSONS TO DO SO EITHER!**

The Public Defender Office hours are 8:30 am - Noon, Monday through Friday. If you call at any other time just leave a message and someone will get back to you the following business day.

3. This office is not permitted to accept collect telephone calls from any prison facility. We will refuse all collect telephone calls.
4. Any communications between yourself and your attorney may not be disclosed to any other person without your consent. The purpose of this rule is to encourage open communications between you and your attorney. With this rule in mind, *the staff of this office will not discuss your case with any person unless you have first provided this office with your written authorization to do so.* Your authorization must include the full name of the person you authorize your attorney to speak with, along with any limits



you wish to impose on those communications. This rule is for your protection and will not be waived under any circumstances. Also note that your authorization for us to release information to others does not require that we do so, only that we may if your attorney feels it will further your interests.

### Continuances and Case Delays

1. There are various rules of criminal procedure which deal with time frames during which the Commonwealth is required to bring your matter to trial. Failure of the Commonwealth to do so may be grounds for securing your release from prison or even the dismissal of the charges against you. *By signing the Public Defender application, you are authorizing the Office of the Public Defender of Jefferson County to extend those time constraints by filing continuances from time to time. Your assigned attorney has authority to request a continuance at any stage of your proceeding and for any reason he or she deems proper, though we are always mindful of your speedy trial rights and will do our best to see that they are preserved.* Normally, continuances are requested because of time limits on our attorneys' calendars, to secure medical, mental health or other records you have authorized us to receive, to continue negotiations with the Commonwealth in order to seek a reduction in your charges or the punishment contemplated for the same, or for tactical purposes which are deemed to be in your best interests. If you are currently incarcerated we will make every effort to see that your case is given priority over non-incarceration cases with respect to progress through the court system so that you do not remain jailed longer than necessary. Frequently, we can secure your release through bail reduction or furlough if we anticipate that your case will need to be continued more than one or two times - please consult with your attorney about the viability of these options. Note that you are not required to be notified or to consent to our filing of continuances. Your attorney will be happy to discuss with you his or her reasons for filing a particular continuance.
2. If you are incarcerated on a parole or probation violation relating to new criminal charges, be aware that the Court may detain you until those new charges are fully prosecuted to conviction, a plea of guilty or acquittal. There is no right to post bail and to be released if detained on a parole or probation violation.

### Additional Information for Applicants, Clients and their Families

1. It is the intent of the Jefferson County Commissioners that the Jefferson County Public Defender will create and maintain a web page within the county's master website. This office will begin adding information to that page which we believe will assist clients and their family members with answers to common questions and concerns. It is our hope that applicants, clients and concerned family members will find this information helpful and informative. The web address for our page is:

<http://www.jeffersoncountypa.com/public-defender>