

COMMONWEALTH OF PENNSYLVANIA

vs.

IN THE COURT OF COMMON PLEAS
DAUPHIN COUNTY, PENNSYLVANIA

No. CP-22-CR-_____-20_____

OTN: _____

(Defendant's name as it appears on criminal complaint)

WAIVER OF APPEARANCE AT FORMAL ARRAIGNMENT

Formal Arraignment Date as set by MDJ : _____

Assigned Common Pleas Judge: _____

**BY SUBMITTING THIS FORM, THE DEFENDANT IS EXCUSED FROM APPEARING ON THE
ABOVE FORMAL ARRAIGNMENT DATE BUT MUST APPEAR AS DIRECTED BELOW**

The defendant is hereby notified that he must appear at 8:30 a.m. on _____, 20____ in
Courtroom No.____, Dauphin County Courthouse, 101 Market Street, Harrisburg, PA.

[If defense counsel indicates a date other than the predetermined waived arraignment date (PWAD), Rule
600 runs against the defendant for all time after the PWAD. Under no circumstances should the selected
date be more than 60 days from the formal arraignment date]

I have been advised of and understand the nature of the charges against me. I hereby enter a plea of NOT
GUILTY to the charges and waive my right to appear for Formal Arraignment. I understand that I have the right
to counsel. I have been advised and understand that I have the right to file a Request for a Bill of Particulars
within 7 days following the Formal Arraignment date; to file a Motion for Pre-Trial Discovery and Inspection
from the attorney for the Commonwealth within 14 days following the Formal Arraignment date; to file an
Omnibus Pretrial Motion within 30 days following the scheduled Formal Arraignment date. I understand that the
attorney for the Commonwealth may file a notice of joinder of offenses or defendants on or before the
scheduled Formal Arraignment.

Unless you or your attorney notifies the District Attorney and the Clerk of Courts of a change of address
in writing, notices for all future court appearances will be mailed to you at the address you provide below.

Defendant's permanent mailing address: _____

If defendant is incarcerated, identify which prison? _____

Defendant's Signature

Date Signed

Defendant's Telephone Number

Attorney's Signature

Date Signed

Attorney's Telephone Number

Attorney's Name Printed

Attorney ID No.

**NOTE THIS FORM CANNOT BE USED UNLESS COUNSEL ENTERS AN APPEARANCE- Pa.R. Crim.P. Rule 571(D)
USE A SEPARATE FORM FOR EACH CASE WITH A SEPARATE OFFENSE TRACKING NUMBER (OTN)**

Distribution: Clerk of Court (Original); Defendant (Yellow); District Attorney (Blue); Defense Counsel (Green); Court Administration (Pink)