

## Instructions for completing the Request for Service Form

**Note: A separate form will be required for each defendant, even if they reside at the same address.**

1. Plaintiff: Fill in the block with the name exactly as it appears on the document.
2. Defendant: Fill in the block with the name exactly as it appears on the document.
3. Docket Number: Type the number exactly as it appears on the document.
4. Type of Writ or complaint: Use the drop down box to select the appropriate document category or type in the information, as you would like it to appear.

5. Service information: Complete each entry to help the deputy fulfill the request.

Name: Defendant's known name

Address: Primary location of the defendant, include apt., floor, etc.

Cell #: The defendant's cellular telephone number.

Home #: The defendant's home telephone.

Alternate address: Use this area to relate another location of the defendant, i.e. work, friend, etc.

Other #: Any other contact telephone numbers for the defendant.

Service:

**Service will be attempted according to Pa Title 231:**

**Rule 402.** Manner of Service. Acceptance of Service.

(a) Original process may be served

(1) by handing a copy to the defendant; or

(2) by handing a copy

(i) at the residence of the defendant to an adult member of the family with who he resides; but if no adult member of the family is found, then to an adult person in charge of such residence; or

(ii) at the residence of the defendant to the clerk or manager of hotel, inn, apartment house, boarding house or other place of lodging at which he resides; or

(iii) at any office or usual place of business of the defendant to his agent or to the person for the time being in charge thereof.

(b) In lieu of service under this rule, the defendant or his authorized agent may accept service...

Special Instructions: Use this block to type any specific service requests, i.e. personal, posted, etc. or any added comments to help the deputy fulfill the request.

7. Attorney/Originator information:

Name: Type in the name of the attorney or originator.

Address: Insert the address of the attorney or originator.

Phone #: Add contact telephone number.

Law Firm: Type in the name of the law firm if applicable

Sign: The signature of the attorney or originator.

8. Save (optional), print and sign the document.

**Any questions should be directed to the  
York County Sheriff's Office - 45 North George Street, York, Pa 17401  
Phone (717) 771-9601**