First Judicial District of Pennsylvania

ELECTRONIC RECORDS-DATA-NONRECURRING REQUEST FORM

See Philadelphia Rule of Judicial Administration No. *402

Name of Requestor _____

Mailing Address _____

City _____ State _____ Zip _____

SUBMIT TO:
Public Access Unit-Electronic Data Request
electronic.data@courts.phila.gov
First Judicial District of Pennsylvania
Room 371 City Hall
Philadelphia, PA 19107

E-mail _____ Phone _____ Fax _____

***Please Note:* *Ad hoc* Reports** are generally subject to a standard programming fee of $85 per hour plus $300 per report.

***See Public Access Fee Schedule* at: https://www.courts.phila.gov/pdf/fees/Fee-Schedule-Public-Access-Amended-7-01-18.pdf**

DESCRIPTION OF ELECTRONIC DATA REQUESTED (Use additional page(s) if necessary)

Disclaimer

Information and Receipt of Information are subject to all relevant legal authority as well as the following:

1. I am aware that a copy of this Request may be provided to the court or department related to this request.
2. I understand that my Request for information is being fulfilled consistent with the provisions of the FJD Electronic Case Records Policy.
3. I understand that any request for electronic data which cannot be compiled using an existing report format will be granted only if the request is not onerous, and the FJD has available personnel and resources needed to compile the information requested without adversely impacting the operations of the FJD or otherwise disrupting its orderly and efficient case flow.
4. I understand that the information provided is correct as of the date supplied; that the FJD will not automatically update the information contained in the Report; that the Report may become obsolete shortly upon production due to ongoing case activity; and I understand and agree that the data provided must be periodically updated or refreshed if the status of any case is reported as being "current," and I agree that unless the data is updated or refreshed I will cease ongoing use of same.
5. I acknowledge that the FJD makes no representation as to the accuracy, completeness or utility for any general or specific purpose, of the information provided and as such, assumes no liability for inaccurate or delayed data, errors or omissions.
6. Use of this information is at my sole risk.
7. By submitting this request, I agree to pay any costs incurred and understand that I will not receive the information described above unless or until I make payment as set forth above.

SIGNATURE _____ DATE _____

To Be Completed by the First Judicial District of Pennsylvania

TASK - SCOPE	COMMENTS
Staff Time ($85 for up to an hour) No. of Hours: _____ Estimate: $ _____	**Date Sent:** **By:**
TOTAL DUE: $	Checks must be payable to "***First Judicial District of Pennsylvania***"

Note: Costs are estimates. If it is determined that actual costs will exceed the estimate, you will be contacted for approval.