

Orphans' Court Cover Sheet

Court of Common Pleas of Philadelphia County Orphans' Court Division Cover Sheet		FOR COURT USE ONLY	
		ASSIGNED TO JUDGE	
		CONTROL NO.	
		<i>Responding parties must include this number on all filings.</i>	
NAME OF ESTATE		ORPHANS COURT NUMBER	
TYPE OF ESTATE <input type="checkbox"/> Decedent's Estate <input type="checkbox"/> Trust Inter Vivos <input type="checkbox"/> Testamentary Trust <input type="checkbox"/> Incapacitated Person <input type="checkbox"/> Minor <input type="checkbox"/> Principal (power of attorney) <input type="checkbox"/> Non-Profit Corporation <input type="checkbox"/> Special Needs Trust <input type="checkbox"/> Other (specify): _____			
FILING PARTY'S RELATIONSHIP TO ESTATE			
PLEADING OR DOCUMENT FILED			
NAME OF FILING PARTY (NOT COUNSEL FOR THE PARTY)		ADDRESS	
ATTORNEYS MUST CHECK ONE BOX TO THE CLERK OF ORPHANS' COURT: <input type="checkbox"/> Kindly enter my appearance on behalf of _____ <input type="checkbox"/> I have entered my appearance on behalf of _____			
NAME OF FILING ATTORNEY OR PARTY		ADDRESS	
PHONE NUMBER	FAX NUMBER		
SUPREME COURT IDENTIFICATION NO.		E-MAIL ADDRESS	
SIGNATURE OF FILING ATTORNEY OR PARTY		DATE	
OTHER PARTIES (Name, address, and telephone number of unrepresented parties or all counsel already of record. If needed, use separate sheet.)			
Is notice required? <input type="checkbox"/> No <input type="checkbox"/> Yes. Copy of notice attached to pleading. Date of Notice: _____ <input type="checkbox"/> Yes. All joinders are attached.		If Citation is requested: 1. Was Citation against Respondent previously issued? <input type="checkbox"/> Yes <input type="checkbox"/> No 2. If yes, date of service: _____	
Has another petition been decided in this case? <input type="checkbox"/> Yes <input type="checkbox"/> No Is another petition pending? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, identify the Judge: _____			
FOR COURT USE ONLY - FIRST FILINGS ONLY (If Applicable)			
DATE OF BIRTH	DATE OF DEATH	REGISTER OF WILLS NUMBER	DATE OF DEED OF TRUST
The Filing Party shall complete the information at the bottom of the Cover Sheet filed with the Clerk, and not the service copies. The information will only be used by the Clerk. The Clerk shall not release this information to the general public.			