

**FIRST JUDICIAL DISTRICT, COURT OF COMMON PLEAS  
TRIAL DIVISION  
OFFICE OF JUDICIAL RECORDS – CIVIL**



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**- OPTIONAL FORM -**

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**MOTION FOR ALTERNATIVE SERVICE FORM  
PURSUANT TO P.A.R.C.P. 430**

**NOTICE:**

The attached form is being offered by the court as an optional resource for people who do not have an attorney. It is not mandatory that you use this form. You are free to create your own document and research legal information for your document if you do not choose to use the court's resources.

This form is also not intended to take the place of legal advice or an attorney. If you need assistance finding an attorney to represent you or give you advice, our court staff can give you information on legal service organizations that may be able to help you.

*This court form is intended for non-attorneys only*

Person Filing this Document:

(Name)

Street Address:

City, State, Zip Code:

Telephone:

Email Address:

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**IN THE COURT OF COMMON PLEAS PHILADELPHIA COUNTY  
FIRST JUDICIAL DISTRICT OF PENNSYLVANIA  
TRIAL DIVISION – CIVIL**

Plaintiff

Case Number

v.

Defendant

**MOTION FOR ALTERNATIVE SERVICE**

1. My name is:

2. I am the: (*Check **all** that apply*)

Plaintiff

Defendant

Other:

3. I am asking the court to permit alternative service for the following party:

(Name of party who was not served)

4. To support my reasons for alternative service, I am providing the following information to the court: *(After you complete these questions, attach to the end of this Motion any documents that will help prove why your reasons should be considered by the Court. Examples include statements or documents of the server's efforts to serve the party.)*

a. The name of the party who could not be served is:

(Name)

b. The party's last known street address is:

(Street Address, City, State, and Zip Code)

c. The documents that could not be served to this party are: *(Check all that apply)*

Court of Common Pleas Civil Complaint

Notice of Municipal Court Appeal

Other: *(Specify)*

d. The person(s) who attempted to give or serve these documents to this party is a:  
*(Check **all** that apply)*

Sheriff

A person from a process serving company:

(Name of company)

Other: *(Answer the questions below if you selected "Other")*

i) The name of the person(s) who tried to serve the documents is/are:

(Name of person(s) who tried to serve the documents)

ii) The person(s) who tried to serve the documents is/are: *(Check **all** that apply)*

Not me.

Not related to me.

Age 18 years old or older.

Not listed as a party in this case.

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e. The dates and times that service was attempted are: *(List dates and times)*

1)

2)

3)

4)

5)

6)

f. The locations/addresses where service was attempted are:

g. I tried to find the correct location or address for the unserved party by: *(Check **all** that apply)\*\**

Asking the post office to locate a current address of the defendant under the Freedom of Information Act, 39 C.F.R. Part 265.

Asking the party's family, friends, neighbors, and employers about their current address.

Doing a reasonable public records search, including local telephone directories, courthouse records, voter registration records, local tax records, motor vehicle records, and a reasonable internet search.

Other: *(Explain in full detail. If you need more space, you can add additional pages to this document.)*

**\*\*Attach to the end of this Motion any documents that show the Court how you tried to find the party. Examples include screen shots of an online person search and letters from the US Postal Service or process server.**

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h. I propose the party be served by: (*Check **all** that apply*)

Regular U.S. Postal Service mail.

Certified U.S. Postal Service mail with return receipt requested.

Posting the documents on the door of the party's last known address with a photograph of the posting.

Publishing a notice in:

- a. The Philadelphia Legal Intelligencer or Pennsylvania Law Weekly **and**
- b. The Philadelphia Inquirer or the Philadelphia Daily News.

Other:

i. I am attaching an Affidavit of Good Faith to this Motion for each party I am having trouble serving to verify that I have made a good faith effort to locate and serve the party. (*Fill-in the Affidavit of Good Faith on the next page. Complete one affidavit per party. The Civil Filing Office can give you additional copies if you need them.*)

**WHEREFORE**, the filing party respectfully requests the Court grant alternative service pursuant to Pa.R.C.P. 430 upon the unserved partes named in this Motion.

Date:

By: \_\_\_\_\_

*Signature*

*Print Name*

*Street Address*

*City, State, Zip Code*

**IN THE COURT OF COMMON PLEAS PHILADELPHIA COUNTY  
FIRST JUDICIAL DISTRICT OF PENNSYLVANIA  
TRIAL DIVISION – CIVIL**

Plaintiff Case Number

v.

Defendant

**AFFIDAVIT OF GOOD FAITH**

**1.** I, *(Print your name)*, hereby certify that on *(Dates of attempted service)*,

I tried to serve *(Print the name of the party who was not served)* a copy of the

following documents: **(Select all that apply)**

Complaint Notice of Appeal

Other: **(Specify documents)**

**2.** I certify that the nature and extent of my efforts to locate the party detailed in the attached Motion for Alternative Service are true to the best of my knowledge, information, and belief.

**3.** I further certify that the statements made in this Affidavit are true and correct to the best of my knowledge and belief and understand that the statements are subject to penalty under 18 Pa.C.S.A., Section 4904 relating to unsworn falsification to authorities.

**Date**

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

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**VERIFICATION**

I, \_\_\_\_\_, the Defendant Other  
                                    (Name)  
in this case, verify that the facts set forth in the foregoing are true and correct to the best  
of my information, knowledge and belief.

I understand that the statements contained herein are subject to the Penalties of  
18 Pa.C.S.A., Section 4904 relating to unsworn falsification to authorities.

Date:

*(Print Name)*

\_\_\_\_\_  
*(Signature)*

**CERTIFICATION OF SERVICE**

I, \_\_\_\_\_, **HEREBY CERTIFY** that on \_\_\_\_\_, a true and correct copy of the attached Motion/Petition, was  
(Date) \_\_\_\_\_, or will be served to the following individuals at the addresses listed below:

Name:  
Address:  
Address:  
City, State, Zip Code:

Name:  
Address:  
Address:  
City, State, Zip Code:

Name:  
Address:  
Address:  
City, State, Zip Code:

The attached Motion/Petition was or will be served to these individuals by: *(Check all that apply)*

**U.S. Mail      Fax      Hand Delivery      Other**

*(Print Name)*

*(Date)*

\_\_\_\_\_  
*(Signature)*

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**IN THE COURT OF COMMON PLEAS PHILADELPHIA COUNTY  
FIRST JUDICIAL DISTRICT OF PENNSYLVANIA  
TRIAL DIVISION - CIVIL**

Case Number

Plaintiff

v.

Defendant

**PROPOSED RULE**

AND NOW, this \_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, upon consideration of the foregoing Motion for Alternative Service, a RULE is hereby entered upon the Respondent to show cause why the relief requested therein should not be granted.

RULE RETURNABLE on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_ a.m./p.m., in Courtroom \_\_\_\_\_, City Hall, Philadelphia, PA 19107.

BY THE COURT:

\_\_\_\_\_  
J.

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**IN THE COURT OF COMMON PLEAS PHILADELPHIA COUNTY  
FIRST JUDICIAL DISTRICT OF PENNSYLVANIA  
TRIAL DIVISION - CIVIL**

Case Number

Plaintiff

v.

Defendant

**PROPOSED ORDER**

AND NOW, this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, upon  
consideration of the Motion for Alternative Service, and any response thereto, it is  
ORDERED and DECREED that the Motion is GRANTED. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

BY THE COURT:

\_\_\_\_\_  
J.

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