

# ***Court of Common Pleas of Berks County***

**Twenty Third Judicial District of Pennsylvania**

## **Domestic Relations Section**

633 Court Street, Sixth Floor

Reading, Pennsylvania 19601-4316

Phone: 610-478-2900

Fax: 610-478-6585 or 610-478-6583

Web Address: <http://www.drs.berks.pa.us>

## ***INSTRUCTIONS FOR OBTAINING A TELEPHONE SUPPORT CONFERENCE/HEARING***

### ***I. CONFERENCES***

1. Obtain an "Application for Telephone Conference" form from the Docketing Division of the Domestic Relations Section or by telephone to the Domestic Relations Section. This form is also available through the web address listed above.
2. Complete the form and return it to the Domestic Relations Section at least **TEN DAYS** before the scheduled conference/hearing, along with all requested financial and medical insurance information.
3. **BE SPECIFIC** as to the reason for the request and be sure to include the telephone number where you can be reached at the time of the conference. It is **NOT** recommended that you participate from your place of employment.
4. Once approved or denied, a copy of your request will be mailed to you with the decision. A copy of this form will also be sent to the other party. If you wish to have your phone number kept confidential, please be sure to indicate this on the form.
5. You are responsible for the costs of the telephone conference. The officer will call you at the number you provided when the conference is ready to begin. You will be given a phone number to call back to begin the conference. If you are not at the phone number provided, the conference will proceed and a default order may be entered in your absence or your complaint will be dismissed for lack of prosecution. ***All conference/hearing times are Eastern time. Please keep this in mind if you are participating by phone from another time zone.***

### ***II. HEARINGS/SPECIAL LIST HEARINGS***

1. If you have had a telephone conference and wish to have a telephone hearing as well, you should advise the conference officer at the conclusion of the conference. The officer will update the application request with any changes, add the date and time of the hearing, and forward the request to the Hearing Officer assigned to the case for approval. You may be required to attend a full hearing even if you had a conference by telephone.
2. If you did not have a telephone conference but require a telephone hearing, follow all the instructions above and complete the request for a telephone hearing.

\_\_\_\_\_  
Plaintiff  
VS

IN THE COURT OF COMMON PLEAS  
OF BERKS COUNTY, PENNSYLVANIA  
DOMESTIC RELATIONS SECTION

\_\_\_\_\_  
Defendant

Docket #: \_\_\_\_\_

Pases #: \_\_\_\_\_

**APPLICATION FOR TELEPHONE CONFERENCE/HEARING**

\_\_\_\_\_ This is a request for a telephone conference:

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Eastern Time

\_\_\_\_\_ This is a request for a telephone hearing:

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Eastern Time

Reason(s) for request for telephone conference/hearing:

\_\_\_\_\_  
\_\_\_\_\_

Telephone number, including area code, where I can be contacted on the day of the conference/hearing: \_\_\_\_\_ Is this number confidential? Yes / No

I understand by making this request, I will:

- 1) be responsible for the costs of the telephone conference/hearing
- 2) be available at the telephone number provided on the day of the conference/hearing (Hearings require being available for the entire AM or PM). If I am not available, the conference/hearing will proceed in my absence. All conference hearing times are Eastern Time.
- 3) provide all required financial and medical insurance information as detailed in the order of court and send the information along with this request form no later than 10 days prior to the conference/hearing. (Without this information, your request may be denied).
- 4) attach a copy of my driver's license or other photo identification to verify my identity.

\_\_\_\_\_  
Defendant / Plaintiff signature

\_\_\_\_\_  
Date

**DOMESTIC RELATIONS SECTION USE ONLY**

Request for telephone conference: **GRANTED / DENIED**

\_\_\_\_\_  
Establishment Unit Manager /For the Court

Request for telephone hearing: **GRANTED / DENIED**

\_\_\_\_\_  
Hearing Officer/ For the Court

**Berks County Court of Common Pleas  
Domestic Relations Section**

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Reading, PA 19601-3595  
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Name \_\_\_\_\_  
PACSES case # \_\_\_\_\_  
Conference date \_\_\_\_\_

**TELEPHONE CONFERENCE CHECKLIST**

Here is a checklist to complete to be sure you have provided all the information needed to participate by telephone. Please complete and return this form with all necessary information.

\_\_\_\_\_ Copy of identification (driver's license, photo id, etc.) and social security card

\_\_\_\_\_ Income and Expense sheet provided to you with the order to appear

\_\_\_\_\_ Copies of last 6 months pay stubs

\_\_\_\_\_ Copy of most recent income tax return

\_\_\_\_\_ Verification of child care expenses, if applicable

\_\_\_\_\_ Proof of available medical coverage for the children/spouse (copies of cards, etc.)

\_\_\_\_\_ Verification of any other source of income, including welfare benefits, SSI , SSD, unemployment benefits, if applicable

\_\_\_\_\_ Medical documentation, if unable to work due to a medical condition

\_\_\_\_\_ Other:

If you are not currently employed and have no source of income, please provide explanation of reason why \_\_\_\_\_

\_\_\_\_\_