

IN THE COURT OF COMMON PLEAS OF ADAMS COUNTY, PENNSYLVANIA
CRIMINAL

COMMONWEALTH OF PENNSYLVANIA, : No. CP-01-CR-
Plaintiff :
 :
VS. :
 :
 :
_____, :
Defendant :

ARD ORDER

AND NOW, this _____ day of _____, 20____, the defendant is admitted into the Accelerated Rehabilitative Disposition Program and is placed on probation for a period of _____ months, subject to standard rules and conditions of probation and special conditions:_____

Defendant is directed to pay the fees and costs set forth in his/her application and agreement and any restitution, and to otherwise abide by conditions set forth therein. Further proceedings on the charges shall be postponed during the term of the ARD Program. The defendant's bail is terminated and any money or other form of security deposited is returned in accordance with the rules pertaining to bail. The following conditions shall also apply, if checked:

- _____ Defendant must pay restitution as set forth in the application.
- _____ Payments made by Defendant in this matter shall be applied to restitution prior to any other applicable fees and costs.
- _____ Defendant must pay costs of prosecution as set forth in the application.
- _____ The Defendant will be evaluated by the Adams County Department of Probation Services for participation in the automated Reporting System and, if deemed appropriate, shall participate in and pay any fees associated with said program.
- _____ Other provisions:_____

BY THE COURT:

Judge

IN THE COURT OF COMMON PLEAS OF ADAMS COUNTY, PENNSYLVANIA
CRIMINAL

COMMONWEALTH OF PENNSYLVANIA, : No. CP-01-CR-
Plaintiff :
 :
VS. :
 :
 :
_____, :
Defendant :

**ACCELERATED REHABILITATIVE DISPOSITION PROGRAM: NON-DUI
APPLICATION, AGREEMENT, MOTION AND ORDER**

I, the defendant above named, hereby apply for admission into the Accelerated Rehabilitative Disposition Program, hereinafter called the ARD Program, and hereby represent and agree as follows:

1. **Speedy trial and related rights:** I understand my right to have the criminal charges against me disposed of in a speedy manner. I also understand that provisions of Pa.R.Crim.P. 600 give me the right to have trial commence within 365 days from the date on which charges were filed against me, and that violation of speedy trial rights and/or the provisions of Rule 600 may give me the right to have all criminal charges dismissed. Further, I understand that prosecution of the charges will be postponed during my participation in the ARD Program and that the Commonwealth must be given the right to prosecute me if I am removed from the ARD Program some time in the future. In this regard, I understand the following:

a) if I violate conditions of the ARD Program, the court may remove me from the ARD Program and place my case back on the trial list.

b) if I am removed from the ARD Program, any delay caused by participation in and administration of the ARD Program will not be counted against the Commonwealth for Rule 600 and constitutional speedy trial provision purposes. I agree that if my trial begins beyond the time period permitted by the rule and constitutional provisions, I will give up any right to claim the benefit of speedy trial and Rule 600 provisions in regard to the time period during which I am on the ARD Program. I agree that I have waived my right to file any Omnibus Pretrial Motions under Pa.R.Crim.P. 578, both prior to my admission to the ARD program and, if applicable, in the event I am removed from the ARD program. In this regard, I understand that important rights may be given up or waived, represent that I am aware of and understand those rights, and voluntarily, knowingly and intelligently choose to waive or give up those rights. If I am, for any reason, refused admission after waiving such rights, my waiver shall be invalidated.

2. **Financial responsibilities:** As a condition of the ARD Program, I agree to pay the sum of \$ _____, in accordance with a payment schedule established by the Adams County Clerk of Courts. In addition, I understand that there may be extraordinary expenses associated with my case which are not included in the standard fee, however, which would constitute court costs as defined by statute and collectable by law. I agree that the Adams County Clerk of Courts may include these extraordinary costs as part of my financial responsibilities and agree to pay the same as a condition of my ARD admission. I acknowledge

that failure to satisfy my financial responsibilities within the time period of my ARD admission shall be grounds for revocation and removal from the ARD Program and/or contempt actions to be filed against me. I understand that this lump sum is comprised of various fees, charges, costs and perhaps restitution. I understand that money paid by me will be periodically distributed to various entities entitled thereto, and that it would be difficult for the Clerk of Courts to refund any money after distribution had occurred. I agree that I shall have neither a right of accounting nor refund as to any money paid by me, should I be removed from the ARD Program nor shall I be entitled to future credit. All money shall become the property of the entity entitled thereto, as established by the Clerk of Courts. I agree that, in addition to ARD program fees, costs, and expenses I will pay Restitution and Costs of Prosecution as follows:

Restitution: _____

Costs of prosecution: _____

I understand that the aforementioned restitution and/or costs of prosecution may only be estimates based upon information presently available. If the Commonwealth subsequently requests to amend these amounts, it shall provide me with written notice of the amount requested and give me the opportunity to agree or disagree with the request. If I agree, the request shall be submitted to the Court for entry of an amended order, but if I disagree the Commonwealth may request that the Court set the matter for hearing.

3. Probation: understand that I shall be placed on probation for up to twenty-four months, subject to standard rules and conditions of probation, and the following special conditions:

I acknowledge that the conditions have been explained to me and that I understand them and that violation of any condition shall constitute grounds for my removal from the ARD Program.

4. Sexual Offenses: I further understand that if I have been admitted to the ARD Program for a sexual offense, that I may be required to undergo counseling which will include submission to one or more polygraph examinations for treatment purposes and that my failure to participate in such examinations, or to comply with treatment recommendations may be a basis for removal from the ARD Program.

5. Successful completion: I understand that the charges against me will be dismissed if I successfully complete the ARD Program.

6. Removal from the Program: I understand that the District Attorney may request my removal from the ARD Program if I do not comply with the terms and conditions as described in this application. I waive the right to have the judge who placed me in the ARD Program rule on the Commonwealth's request and agree that any judge may decide the matter. I understand that a judge may order that process should issue for my arrest so that I would be produced and be given a chance to speak on the matter. I waive the right to be personally present and agree that a judge may remove me from the ARD Program, in my absence, if I have been given reasonable notice and an opportunity to appear.

7. Extensions: I understand that the maximum time for ARD programs, as authorized by law, is two years. If I am, for any reason, unable to comply with the conditions of the ARD Program within the term of my ARD Supervision, I understand that I may be given an opportunity to apply for consensual removal from and readmission in to the ARD Program.

However, my eligibility for readmission is at the sole discretion of the Commonwealth, subject to Court approval and is not a right. If I make such a request in the future, I agree that the acknowledgments and waivers I am presently making shall be incorporated into the request.

8. No prior Convictions or ARD or Pending Criminal Charges: In consideration for my admission to the ARD Program, I hereby affirm and acknowledge that I have not been convicted of a misdemeanor or felony criminal offense in the State of Pennsylvania or in any other state; that I have never been placed on the Accelerated Rehabilitative Disposition Program in this or any other jurisdiction; that I have not previously been admitted to a pre-disposition program similar to ARD in this or in any other state and that I do not have any pending misdemeanor or felony criminal charges pending in the State of Pennsylvania or in any other state or federal jurisdiction. I understand that should this information be incorrect, that I may be removed from the ARD Program and, further, that I may be prosecuted subject to the provisions of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

9. Legally present in United States: In consideration for my admission into the ARD Program, I hereby affirm and acknowledge that I was legally present in the United States at the time I was charged with the offense and currently I legally reside in the United States. I understand that should this information be incorrect, that I may be removed from the ARD Program and, further, that I may be prosecuted subject to the provisions of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

10. Bail: I understand that once the Judge grants my motion for entry into the ARD Program, bail shall be terminated and any money or other form of security deposited shall be returned to me in accordance with the rules pertaining to bail.

11. Expungement: I understand that it is my responsibility to pursue expungement and pay any necessary or applicable fees associated with expungement, upon my completion of the ARD Program.

I hereby request the Commonwealth of Pennsylvania to admit me into the Accelerated Rehabilitative Disposition Program.

Defendant

Attorney for Defendant

MOTION BY COMMONWEALTH

AND NOW, this _____ day of _____, 20____, I hereby move the defendant's admission into the ARD Program in accordance with his/her application agreement.

District Attorney/Assistant District Attorney

Adams County Department of Probation Services

Conditions of Accelerated Rehabilitative Disposition Program as supervised by the Department of Probation Services

Name: _____

Case #: _____

The Adams County Court of Common Pleas has conditionally placed you under the supervision of the Adams County Department of Probation Services. You must comply with all conditions of supervision as set forth. If you violate any of these conditions of supervision, the Department of Probation Services has the authority to request an ARD Review Hearing to determine if the Accelerated Rehabilitative Disposition Program remains an appropriate disposition.

1. You must not commit any violation of the law or violate the terms and conditions of any active protection from abuse order.
2. You must not commit any action which may cause fear, annoyance, or alarm to the victim of any case where charges have been filed against you.
3. You must agree to have your person, blood, breath, or urine tested as directed by the Department of Probation Services or Prison Officials.
4. You must report to the Department of probation services when directed including the automated reporting system as deemed appropriate and obey all directions given by any Probation/Parole Officer.
5. You must notify the Department of Probation Services in advance of any changes of mailing address, physical residence or change in phone number, or if advance notice is not possible, within 15 days.
6. You must report any contact with a law enforcement official or agency to the Department of Probation Services within the next business day. This includes any arrest, receipt of a criminal complaint, citation, or summons.
7. You must pay your debts which include but not limited to, Court Ordered obligations, Child support, cost of counseling, therapy and treatment, costs associated with the automated reporting system if deemed appropriate by the Department of Probation Services. All ARD costs, fines, and restitution must be paid no later than 30 days prior to the anticipated program end date on such payment plan as may be established by the Clerk of Courts Office.
8. You must not use or possess non-prescribed controlled substances,
9. You must comply with all special conditions ordered by the Court reflective in the ARD order of Court. You must participate in and successfully complete any programs of treatment or counseling recommended by any Court Ordered evaluation or assessment.

If placed on ARD supervision for a DUI offense, you are also subject to the following conditions:

10. You must complete a CRN evaluation and follow through with any recommendations resulting therefrom, including the Alcohol Highway Safety School and drug and alcohol evaluation with any recommended counseling.
11. You are prohibited from the consumption or possession of any alcoholic beverage while in the program if your arrest and/or criminal charges involved the use of alcohol.

I hereby acknowledge that I have read or have had read to me, the foregoing conditions. I fully understand and agree to comply with them.

Defendant: _____

Date: _____

Witness: _____

Date: _____