

## LYCOMING COUNTY COURTS

## **Request Form for Use of the Court's Facility Dog**

Case Name: _		Case Number:				
Type of Case:	Dependency	Criminal	Juvenile	Civil	Other:	_
Party requesting	g the Facility Dog	;:		<del> </del>		
Date/Time of H	learing:		Expected Length of Hearing:			
Brief descriptio	n of need for the	Facility Dog (	including nan	ne of Vict	im/Witness):	
Brief descriptio	n of any concerns	s or notes for t	he Handler:			
_	-					

**Email completed form to:** 

jrook@lyco.org

Or send by mail to:

Jerri Rook Lycoming County Courthouse 48 West Third Street Williamsport, PA 17701