

Counter-Affidavit Regarding Relocation

Form 10

Counter-Affidavit Regarding Relocation

This form must be sent to the non-relocating parent along with the Notice of Proposed Relocation, regardless of whether you have a court case or do not have a court case. The numbers on these instructions correspond with the numbers in the boxes.

- Box 1: Print the name of the county in which you have a custody order.
- Box 2: Print the plaintiff's name exactly as it appears on the other forms in this action.
- Box 3: If you have a court case, print the case number here. If you do not have a court case, leave blank.
- Box 4: Print the defendant's name exactly as it appears on all other forms in this action.

**YOU MUST PROVIDE A COPY OF THIS FORM WITH
YOUR NOTICE OF RELOCATION.**

IN THE COURT OF COMMON PLEAS OF _____ **1** COUNTY, PENNSYLVANIA

2

Plaintiff

v. **4**

Defendant

:
:
:
:
:
:
:

No. **3**

CUSTODY

COUNTER-AFFIDAVIT REGARDING RELOCATION

This proposal of relocation involves the following child/children:

Child's Name	Age	Currently residing at:
_____	_____	_____
Child's Name	Age	Currently residing at:
_____	_____	_____
Child's Name	Age	Currently residing at:
_____	_____	_____

I have received a notice of proposed relocation and *(check all that apply)*:

1. I do not object to the relocation.
2. I do not object to the modification of the custody order consistent with the proposal for modification set forth in the notice.
3. I do not object to the relocation, but I do object to the modification of the custody order.
4. I plan to request that a hearing be scheduled by filing a request for hearing with the court:
 - a. Prior to allowing _____ (name of child/children) to relocate.
 - b. After the child/children relocate.
5. I do object to the relocation.
6. I do object to the modification of the custody order.

I understand that in addition to objecting to the relocation or modification of the custody order above, I must also serve this counter-affidavit on the other party by certified mail, return receipt requested, addressee only, or pursuant to Pa.R.C.P. No. 1930.4, and, if there is an existing custody case, I must file this counter-affidavit with the court. If I fail to do so within 30 days of my receipt of the proposed relocation notice, I understand that I will not be able to object to the relocation at a later time.

I verify that the statements made in this counter-affidavit are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904 (relating to unsworn falsification to authorities).

Date

Signature

IN THE COURT OF COMMON PLEAS OF _____ COUNTY, PENNSYLVANIA

_____	:	
Plaintiff	:	
	:	
v.	:	No. _____
	:	
_____	:	CUSTODY
Defendant	:	

COUNTER-AFFIDAVIT REGARDING RELOCATION

This proposal of relocation involves the following child/children:

Child's Name	Age	Currently residing at:
_____	_____	_____
Child's Name	Age	Currently residing at:
_____	_____	_____
Child's Name	Age	Currently residing at:
_____	_____	_____

I have received a notice of proposed relocation and *(check all that apply)*:

1. I do not object to the relocation.
2. I do not object to the modification of the custody order consistent with the proposal for modification set forth in the notice.
3. I do not object to the relocation, but I do object to the modification of the custody order.
4. I plan to request that a hearing be scheduled by filing a request for hearing with the court:
 - a. Prior to allowing _____
(name of child/children) to relocate.
 - b. After the child/children relocate.
5. I do object to the relocation.
6. I do object to the modification of the custody order.

I understand that in addition check (2) or (3) above, I must also serve this counter-affidavit on the other party by certified mail, return receipt requested, addressee only, or pursuant to Pa.R.C.P. No. 1930.4, and, if there is an existing custody case, I must file this counter-affidavit with the court. If I fail to do so within 30 days of my receipt of the proposed relocation notice, I understand that I will not be able to object to the relocation at a later time.

I verify that the statements made in this counter-affidavit are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904 (relating to unsworn falsification to authorities).

Date

Signature