IN THE COURT OF COMMON PLEAS OF NORTHAMPTON COUNTY, PENNSYLVANIA CRIMINAL DIVISION

COMMONWEALTH OF PENNSYLVANIA)	CASE NO .:
)	
VS.)	CHARGES:
)	

APPLICATION FOR CONTINUANCE AND WAIVER OF RULE 600 – RIGHT TO A SPEEDY TRIAL

AND NOW, this _____day of ______, 20____, I, the undersigned Defendant, hereby request acontinuance of the above-captioned case for the following reasons:

I understand that my new trial date is ______, 20____. I will appear on that date in Courtroom #1 at the Northampton County Government Center and this is the only notice I will receive. I have been fully advised and understand the consequences of the execution of this waiver of my right to a speedy trial under Rule 600. I make this decision voluntarily without threats, force, or coercion.

I understand that if I am presently incarcerated as a result of the filing of a criminal complaint against me, I have the right to have my trial within 180 days from the date of the filing of the criminal complaint. The failure of the Commonwealth to commence my trial date within 180 days will result in my release on nominal bail upon my request.

I further understand that I have an absolute right to have my trial within 365 days from the date of the filing of the criminal complaint. If my trial is not held within 365 days from the date of the filing of the criminal complaint, the charges against me must be dismissed.

NUMBER OF PREVIOUS CONTINUANCES: COMMONWEALTH DEFENDANT:

DATE CRIMINAL COMPLAINT FILED:

DO NOT LIST FOR TRIAL UNTIL: CRIMINAL TERM.

TRIAL DATE: ______ at 9:00 a.m. in Courtroom 1

Signature of the Defendant

I hereby certify that I have fully explained this waiver to the Defendant. I am satisfied that he/she understands the nature of the right he/she is waiving, and the consequences of this waiver. I further certify that the Defendant was alert and unimpaired when he/she executed this waiver, that the Defendant signed this waiver in my presence and that the Defendant has authorized me to present this waiver to the Court on his/her behalf in his/her absence.

AND NOW, _____, 20____, the above waiver of Rule 600 is approved.

Signature of Defense Counsel

I.D. Number

OBJECTION: YES NO

J.

Assistant District Attorney