

vs

NO.

Praecipe for Notice of Intent to Attach Wages

To the Prothonotary:

Issue a Notice of Intent to Attach Wages in the above matter

- (1) against \_\_\_\_\_, defendant,
- (2) against \_\_\_\_\_, employer of the defendant

Date:

Attorney for Judgment Creditor-Landlord or  
Judgment Creditor-Landlord if unrepresented

Certification by Judgment Creditor - Landlord

I certify that:

- 1. The plaintiff judgment-creditor is \_\_\_\_\_  
Name  
\_\_\_\_\_  
Address
- 2. The defendant judgment-creditor is \_\_\_\_\_  
Name  
\_\_\_\_\_  
Address
- 3. The Employer garnishee is \_\_\_\_\_  
Name  
\_\_\_\_\_  
Address

4. The judgment arises out of a residential lease for the premises at

\_\_\_\_\_ (address)

5. (a) The amount of the judgment is \$ \_\_\_\_\_  
(b) A security deposit in the amount of \$ \_\_\_\_\_ is being held by the judgment deposit creditor-landlord. This security deposit \_\_\_\_\_ been applied  
\_\_\_\_\_ has not been applied

to payment of rent due on the same premises for which the judgment has been entered.

(Any security deposit that has not already been applied to rent will be deducted by the Prothonotary from the amount of the judgment in determining the amount to be attached)

The amount of \$ \_\_\_\_\_ has been paid toward satisfaction of the judgment. (Do not include security deposit)

6. This praecipe is filled within five years of the date of the original judgment upon which execution is sought.

7. The judgment was entered (check one)

\_\_\_\_\_ in a civil action commenced in the court of common pleas  
\_\_\_\_\_ in an action brought before a magisterial district justice  
\_\_\_\_\_ in an action commenced in the Philadelphia Municipal Court.

8. Check the appropriate paragraph and attach the required documents:

\_\_\_ (a) If the judgment was entered in a civil action (Pa.R.C.P.M.D.J 301 et seq.) before a magisterial district judge, a copy of the complaint filed with the magisterial district judge is attached to this notice, showing that the action arose from a residential lease.

\_\_\_ (b) If the judgment was entered in an action for the recovery of possession of real property (Pa.R.C.P.M.D.J 301 et seq.) before a magisterial district judge, copies of the appropriate magisterial district judge records are attached showing that the action rose from a residential lease and that the defendant appeared or filed papers in the action or that the complaint was served by handing a copy to the defendant.

\_\_\_ (c) If the judgment was entered in an action in the Philadelphia Municipal Court in which the defendant was served pursuant to Phila.M.C.R.Civ.P.No. 111(a) or (c), a copy of the complaint filed with the Philadelphia Municipal Court is attached to this notice, showing that the action arose from a residential lease.

\_\_\_ (d) If the judgment was entered in an action in the Philadelphia Municipal Court in which the defendant was served pursuant to Phila.M.C.R.Civ.P.No. 111(b), copies of the appropriate Philadelphia

Municipal Court records are attached showing that the action arose from a residential lease and that the defendant appeared or filed papers in the action.

I certify that the statements made in this Certification 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: \_\_\_\_\_

\_\_\_\_\_  
Judgment Creditor-Landlord

IN THE COURT OF COMMON PLEAS OF MONTGOMERY COUNTY, PENNSYLVANIA

\_\_\_\_\_  
\_\_\_\_\_  
vs  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NO.

NOTICE OF INTENT TO ATTACH WAGES, SALARY OR COMMISSIONS

Date of service of this notice: \_\_\_\_\_ (Date to be inserted by Sheriff)

A judgment has been entered against you for nonpayment of rent for or damage to, residential property that you rented. The judgment creditor-landlord has begun proceedings to attach 10% of your net wages, salary or commissions for each pay period until the judgment is satisfied.

The following exception will prevent your wages from being attached:

Poverty Guidelines - Your wages may not be attached if your net income is below the poverty income guidelines provided annually by the federal Department of Health and Human Services or if the amount of the attachment would cause your net income to fall below the poverty income guidelines. A copy of the guidelines is attached to this notice.

If this exemption is applicable to you, you must return the claim for exemption of wages which is attached to the Prothonotary within 30 days of the date of service of this notice upon you. The date of service of this notice is set forth above. If you return the form claiming this exemption within 30 days, your wages will not be attached without subsequent court proceedings.

There may be other legal grounds for opposing the wage attachment that you may be able to raise by filing a motion with the court. For example, your wages may not be attached if you are an abused person or victim as set forth in Section 8127(f) of the Judicial Code when the attachment is to satisfy physical damages to the leased premises.

**YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER.**

**IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY**

OFFER LEGAL SERVICES TO ELLIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.

Lawyer Reference Service  
Montgomery Bar Assoc.  
100 W. Airy Street  
P.O. Box 268  
Norristown, PA 19404-0268  
(610) 279-9660

(b) The claim for exemption from wage attachment shall be substantially in the following form:

IN THE COURT OF COMMON PLEAS OF MONTGOMERY COUNTY, PENNSYLVANIA

\_\_\_\_\_  
\_\_\_\_\_  
vs  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NO.

CLAIM FOR EXEMPTION FROM WAGE ATTACHMENT

Notice

This Claim for Exemption must be filed with the Prothonotary of the Court within 30 days of service Upon You of the Notice of Intent to Attach Wages.

To the Prothonotary:

I, the above-named defendant, claim exemption of my wages, salary or commissions from the attachment on the following ground:

\_\_\_ My net monthly income is below the poverty income guidelines as provided by the Federal Department of Health and Human Services.

OR

\_\_\_ The amount of wages to be attached would place my net income below the poverty income guidelines as provided annually by the Federal Department of Health and Human Services.

I have \_\_\_\_\_ dependents.  
(Number)

My net monthly income is \$ \_\_\_\_\_ .

(Net monthly income is your total monthly wages less (1) any support payments made to the court, (2) federal, state and local income taxes, (3) F.I.C.A. payments and nonvoluntary retirement payments. (4) union dues and (5) health insurance premiums.)

I certify that the statements made in this Claim for Exemption 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: \_\_\_\_\_  
\_\_\_\_\_ Defendant

This claim shall be delivered or mailed to

Office of the Prothonotary  
Court of Common Pleas  
P.O. Box 311  
Norristown, PA 19404-0311

IN THE COURT OF COMMON PLEAS OF MONTGOMERY COUNTY, PENNSYLVANIA

\_\_\_\_\_  
\_\_\_\_\_  
vs  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NO.

NOTICE OF CLAIM EXEMPTION  
OF WAGES FROM ATTACHMENT

To the above-named plaintiff:

The defendant in the above-captioned matter has filed a claim for exemption from attachment of his or her wages, salary or commissions. A copy of this claim is attached. If you wish to challenge the claim for exemption, you should file with the court a motion setting forth facts which show the defendant's net income is not below the Federal Department of Health and Human Services poverty income guidelines or that the attachment will not cause the defendant's income to fall below those poverty income guidelines.

Date: \_\_\_\_\_

\_\_\_\_\_  
Prothonotary

**2023 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA**

| <b>Persons in family/household</b> | <b>Poverty guideline</b> |
|------------------------------------|--------------------------|
| 1                                  | \$14,580                 |
| 2                                  | \$19,720                 |
| 3                                  | \$24,860                 |
| 4                                  | \$30,000                 |
| 5                                  | \$35,140                 |
| 6                                  | \$40,280                 |
| 7                                  | \$45,420                 |
| 8                                  | \$50,560                 |

**2023 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA**

| <b>Persons in family/household</b> | <b>Poverty guideline</b> |
|------------------------------------|--------------------------|
|------------------------------------|--------------------------|

For families/households with more than 8 persons, add \$5,140 for each additional person.

**2023 POVERTY GUIDELINES FOR ALASKA**

| <b>Persons in family/household</b> | <b>Poverty guideline</b> |
|------------------------------------|--------------------------|
| 1                                  | \$18,210                 |
| 2                                  | \$24,640                 |
| 3                                  | \$31,070                 |
| 4                                  | \$37,500                 |
| 5                                  | \$43,930                 |

**2023 POVERTY GUIDELINES FOR ALASKA**

| <b>Persons in family/household</b> | <b>Poverty guideline</b> |
|------------------------------------|--------------------------|
| 6                                  | \$50,360                 |
| 7                                  | \$56,790                 |
| 8                                  | \$63,220                 |

For families/households with more than 8 persons, add \$6,430 for each additional person.

**2023 POVERTY GUIDELINES FOR HAWAII**

| <b>Persons in family/household</b> | <b>Poverty guideline</b> |
|------------------------------------|--------------------------|
| 1                                  | \$16,770                 |
| 2                                  | \$22,680                 |

**2023 POVERTY GUIDELINES FOR HAWAII**

| <b>Persons in family/household</b>  | <b>Poverty guideline</b> |
|---|--------------------------|
| 3   | \$28,590                 |
| 4   | \$34,500                 |
| 5   | \$40,410                 |
| 6   | \$46,320                 |
| 7   | \$52,230                 |
| 8   | \$58,140                 |
| For families/households with more than 8 persons, add \$5,910 for each additional person. |                          |