

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

2 Administrative Order

3 Number 9 of 2024

4 In Re: Conditions of Supervision

5 **ORDER OF COURT**

6 AND NOW, 26th day of June, 2024, the Court declares that the conditions of supervision by the
7 Adams County Department of Probation Services as reflected in Attachment A are necessary to
8 promote a defendant's rehabilitation and for the protection of the public. This Order shall not limit the
9 sentencing Judge from waiving any condition or adding additional conditions if the Court determines
10 that waiver or addition fulfills the least restrictive means to accomplish defendant rehabilitation and
11 public protection as required by 42 Pa. C.S.A. §9763(b).

12 Administrative Order 6 of 2024 is HEREBY VACATED.

13 BY THE COURT,

14
15 MICHAEL A. GEORGE

16 President Judge

17 df

18 Board of Judges/Executive Assistants to the Board of Judges

19 Court Administration

20 Department of Probation Services

21 Office of the District Attorney

22 Office of the Public Defender

23 Clerk of Courts Office

24 Law Library

25 Adams County Bar Association

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ATTACHMENT A

COPY

Adams County Department of Probation Services
Conditions of Supervision for Probation, Probation with Restrictive Conditions, and Parole

Name: _____

Case Number: CP-01-_____

The Adams County Court of Common Pleas has conditionally released/placed you under the supervision of the Adams County Department of Probation Services. You must comply with all conditions of supervision listed below. If you violate any of these conditions of supervision, the Department of Probation Services has the authority to temporarily detain you and/or return your case to court for revocation proceedings.

1. You must not commit any violation of the law and must report any contact with law enforcement officials.
2. You must refrain from any assaultive behavior or credible threat to cause bodily injury to another, including acts committed against a family or household member. You will not annoy or harass any victim or witness of your crime.
3. You must agree to permit any Probation/Parole Officer to search your person, enter into and search your residence, vehicle or any other property under your control without warrant at any time upon reasonable suspicion of violation and to ensure compliance with all conditions of your sentence.
4. You may not possess or have control of a firearm or dangerous weapon on your person, in your residence, or in your vehicle, unless otherwise waived by the court.
5. You may not abscond and must report as directed by the Department of Probation Services. You must notify the Department of Probation Services of any change in address or employment within 15 days.
6. You must not possess, manufacture, sell, deliver, or use any non-prescribed controlled substances, with the exception of possession and use of a non-prescribed controlled substance that is legally permitted to be possessed and used for medical or treatment purposes as certified by an approved physician.
7. You must submit to urine testing or breathalyzer as required by the Department of Probation Services. Urine samples must be provided within two (2) hours of request and be of sufficient quality and quantity for chemical testing.
8. If you have been placed on supervision for a DUI offense, you will be subject to the following conditions:
 - a) You will undergo a drug and alcohol evaluation and comply with all treatment recommendations in accordance with Act 122 of 1990.
 - b) You will successfully complete the Alcohol Highway Safety School.
9. If you have been sentenced to Probation with Restrictive Conditions with the restrictive time being served on house arrest or in the Adams County Adult Correctional Complex (ACACC), you must comply with all rules and conditions of house arrest and the ACACC. You must not receive any formal misconducts while serving the restrictive time at the ACACC.
10. You must comply with all special conditions ordered by the Court within your most recent sentencing or supervised bail order on the case noted above.

ACKNOWLEDGEMENT

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: _____

Adams County Department of Probation Services Sex Offender Conditions of Supervision

Name: _____

Case #: _____

1. You shall obtain a sex offender evaluation from a certified sex offender treatment provider and follow through with all expectations and recommendations resulting therefrom and shall assume all responsibility for the costs of any required program. You shall provide written authorization for release of confidential information between your certified sex offender treatment provider and the Adams County Department of Probation Services.
2. You shall submit to regular polygraph examinations as directed by the treatment provider. You are responsible for the cost of this service.
3. If your offense involved a minor victim, you shall not frequent places where children congregate including but not limited to, playgrounds, swimming pools, schools, malls, arcades. You shall not engage in any activity or employment that will bring you in close contact with children unless you receive permission from your Probation Officer.
4. If your offense involved a minor victim, you are not permitted to reside with minor children without permission from the Court; this includes children within your family. You will not have any contact with minor children without permission from your Probation Officer or a Court Order. If supervised contact is permitted, the individual who provides the supervision must first be approved by your Probation Officer and the treatment provider.
5. You will not possess pornographic materials of any kind, including photographs, movies, or computer-generated images depicting or showing nudity. You shall not enter adult book stores, adult entertainment clubs, massage parlors or any other establishment that promote sexual material or objectifies males or females.
6. You may not possess images of your victim(s) in any format.
7. You will sign and agree to the conditions of the Sex Offender Internet Capable Device and Internet Access Agreement.
8. For monitoring purposes, you are subject to search of cell phone, camera/video recorder, computer, gaming device and their accessories, and any other device capable of internet access. These items may be viewed and/or scanned at any time to detect pornographic or sexually explicit content. You will agree to have a technology monitoring device or program installed on any computer or device you are authorized to possess or to which you have access if your certified sex offender treatment provider recommends or if there is a violation of any of these sex offender conditions or the Sex Offender Internet Capable Device and Internet Access Agreement.
9. You will comply with all sex offender registration and statutory requirements if applicable. You must provide fingerprints, palm prints, DNA sample and photograph, pursuant to 42 Pa.C.S.A.9799.23(a)(4)
10. You shall obtain permission from a Probation Officer before leaving the Commonwealth of PA.
11. You shall not receive mail at any other location than your home residence address without your Probation Officers approval.
12. You are required to sign "Release of Information" forms as directed.

ACKNOWLEDGEMENT

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/Juvenile: _____

Date: _____

Probation Officer: _____

Date: _____

Parent/Guardian: _____

Date: _____