

**COURT OF COMMON PLEAS, LANCASTER COUNTY, PENNSYLVANIA  
ADULT PROBATION & PAROLE SERVICES (APPS)  
Sex Offender Probation and Parole Regulations**

**Name** \_\_\_\_\_ **Information #** \_\_\_\_\_

RULES 1 THROUGH 17 SHALL APPLY TO ALL CLIENTS IN THE SEX OFFENDER PROGRAM.

1. I will report in person or in writing to my probation officer according to his/her instructions.
2. I will live in a residence approved of by my probation officer. I will not change my residence without the approval of my probation officer. My probation officer will visit my home at any time in order to effectively confirm compliance with the conditions of my supervision, and I will cooperate with the efforts of my probation officer when he/she does so. I will not sleep or stay overnight at an address other than the pre-approved residence without the permission of my probation officer.
3. I will comply with all state and federal laws and all municipal ordinances. I will immediately notify my probation/parole officer of any arrest or investigation by a law enforcement agency. I will immediately notify my probation/parole officer of any investigation or contact by any Children and Youth Agency. I will refrain from any assaultive or threatening behavior.
4. I will make every effort to obtain and maintain employment. I will obtain permission prior to changing employment. If I lose my employment, I will immediately notify my probation/parole officer and follow any instruction my probation/parole officer makes for me to obtain employment.
5. I will not travel outside a 30 mile radius of my residence (within the border of Pennsylvania) without permission from my probation/parole officer. I will not travel outside the border of Pennsylvania without obtaining a written travel permit from my probation/parole officer. While traveling outside of Pennsylvania, I will comply with the receiving jurisdiction's sex offender registration requirements. This written travel permit must be obtained 48 hours in advance and must include destination, dates of travel, purpose, accompanying individuals, and mode of transportation. Failure to obtain a proper travel permit will result in a violation of supervision and may also result in criminal charges by the state you illegally entered.
6. I will not possess, have control of, or have in my place of residence or vehicle, any contraband such as stolen property, controlled substances (drugs), drug paraphernalia, firearms (hand guns, rifles, shotguns) or any other dangerous weapons, including, but not limited to, bow and arrow, prohibited offensive weapons, or any instruments of crime. If my probation/parole officer has reason to suspect that a violation of supervision has occurred, he/she may search my person, vehicle or residence as deemed necessary to enforce the conditions, rules and regulations of the Lancaster County APPS.
7. I will not be under the influence of any alcohol, or controlled substances unless by medical prescription, while participating in any capacity in any court appearances, or when undertaking any probation/parole obligations.
8. I will abstain from the unlawful possession, use or delivery of any non-prescribed controlled substances, including marijuana and synthetic substances. I will submit to urinalysis and/or breathalyzer testing as required by my probation officer. Any refusal to submit to testing will be considered a violation of my supervision. I will reimburse the court for the cost of laboratory fees sustained upon positive confirmation of drug use.
9. I understand that any statements, verbal or written, made by me to my probation/parole officer which are subsequently found to be false, may be considered a violation of probation/parole.
10. I understand that failure to pay fines, costs or restitution as directed by the Court or my probation officer constitutes a violation of my probation/parole (see attached Financial Requirements page).
11. I will participate in and complete an APPS risk/need assessment and comply with any recommended treatments and interventions that are determined to be medium, high, or very high need per the resulting risk/need assessment case management plan.
12. I will participate in Court-approved counseling for sex offenders as directed by APPS and I will comply with the conditions of the treatment program.
13. I may not own, possess, or view any obscene materials or materials which depict or describe sexual conduct or nudity in any form. I may not own or possess any sexual aids or devices. I shall not own, possess, or view any materials related to or part of my offense cycle. Such materials include, but are not limited to, images of my victim, stories or images related to my crime or similar crimes, images which depict individuals similar to my victims (e.g. children), stories written about or for individuals similar to my victim, or materials focused on the culture of my victim (e.g. children's shows or web sites).
14. I may not own or possess any item that would allow me to establish authority over another person, including, but not limited to, law enforcement, EMS, or fire service paraphernalia. I may not own or possess any item designed to incapacitate or restrain other people, including but not limited to handcuffs or electrical stun devices.
15. I will not contact, nor make any attempts to contact any of my victims or their families including, but not limited to, letters, phone calls, tapes, videos, visits, or any form of contact through a third party.
16. I will not enter into adult bookstores, strip clubs, or massage parlors. I will not solicit prostitutes, escort services, or adult sexual services via the phone or internet.
17. I will abide by any other conditions imposed by the Court. I will not deviate from any of the special conditions of my probation/parole for sexual offenders without first receiving permission from my sexual offender treatment provider and my probation/parole officer.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Probationer/Parolee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Probationer/Parolee Printed

\_\_\_\_\_  
Date

**RULES 18 THROUGH 20 SHALL APPLY TO THOSE SEXUAL OFFENDERS WHOSE CURRENT OFFENSES INVOLVE OR ATTEMPTED TO INVOLVE ANY MINORS, OR WHO HAVE A HISTORY OF SEXUAL OFFENDING AGAINST MINORS.**

- 18. I will not accept employment or volunteer for any activity that directly or indirectly involves minors including, but not limited to, school bus driver, shopping mall security, daycare worker, or Sunday School teacher.
- 19. I will have no unsupervised contact with minor children (under the age of 18 years old) including, but not limited to, letters, phone calls, visits, or any form of contact through a third party without the permission of Lancaster County APPS, or a Court order permitting such contact. The individual who provides supervision must first be approved by the probation officer and the treatment provider.
- 20. I will not visit places where children congregate including, but not limited to, religious services, schools, playgrounds, swimming pools, arcades, amusement parks, campgrounds, carnivals, and libraries without an approved supervisor.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Probationer/Parolee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**RULES 21 THROUGH 30 SHALL APPLY TO THOSE SEXUAL OFFENDERS WHOSE CURRENT OFFENSES INVOLVE OR ATTEMPTED TO INVOLVE THE USE OF COMPUTERS OR OTHER ELECTRONIC DEVICES, OR WHO HAVE A HISTORY OF USING COMPUTERS OR OTHER ELECTRONIC DEVICES IN A SEXUAL MANNER OR TO VIOLATE ANY OF THE RULES OF PROBATION AND PAROLE.**

- 21. I will allow monitoring software to be installed on any eligible internet device in my residence and/or at my place of employment. I will allow my probation/parole officer to inspect, maintain, and troubleshoot the monitoring software.
- 22. I agree to pay the cost of the monitoring software as directed by my probation/parole officer. If I do not allow, or the internet device's owner does not allow such monitoring, I understand I will need to find a new residence or agree to remove all internet devices from the residence.
- 23. I shall only use internet devices that have been authorized for my use. I will only utilize operating systems that are approved by Lancaster County APPS. I shall not possess any other internet devices or allow another individual to bring or possess an unauthorized internet device in my home. I shall log in to my authorized internet device using my assigned user name. I will not own, use, or possess any other device which allows Internet access other than what is authorized by my probation/parole officer. I am permitted to use authorized internet devices at my place of employment for employment purposes only.
- 24. I agree not to attempt to remove, disable, inhibit, damage, or circumvent any part of any computer monitoring software. I will not create, alter, or destroy records of computer use including, but not limited to, deleting browser history or possessing software or items designed to alter or "wipe" electronic media or to defeat forensic software.
- 25. I will not use any electronic device for any purpose which might further sexual activity. Such use includes, but is not limited to, the possession of sexually explicit material, participating in sexually related chat rooms, instant messaging, text messaging, or e-mail exchanges, visiting/viewing web sites, user groups, newsgroups, or list servers that contain nudity or sexually explicit materials, or the utilizing of peer-to-peer file sharing, ftp activity, or other similar conduct in violation of rules 13,19, and/or 20.
- 26. I shall not access or participate in any social networking or dating web sites including, but not limited to Facebook, Twitter, Instagram, or Match.com.
- 27. I shall not access any Internet Service Provider account or other online service using an alias or another person's name, account, or designation. I will disclose all online accounts including user-names and passwords to my probation/parole officer upon request.

- 28. I will not have another individual access the Internet on my behalf to obtain files or information which I am restricted from accessing myself.
- 29. I will not employ any form of encryption or any other method that might limit access to or change the appearance of data or images. This also includes a prohibition against restoring a computer to a previous state, the reinstallation of operating systems, or the installation of alternate operating systems. I shall not download, possess, or install any spyware detection application, system monitoring application, or keystroke logger. I shall not own or use bootable operating systems.
- 30. I shall inform my probation/parole officer of all media devices that I own.

I understand the monitoring software to be installed is commercially available, installed, and utilized on internet devices nationwide. While there are no known conflicts or defects in these software packages, I indicate by my signature below that I accept all responsibility and risk for the monitoring software installation and use on any internet device. Further, I agree to hold harmless Lancaster County APPS for any direct, indirect, incident, special, or consequential damages whatsoever, including but not limited to, loss of revenue or profit, lost or damaged data, or other commercial or economic loss as a result of the monitoring software.

Witness \_\_\_\_\_

Probationer/Parolee \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

**FINANCIAL REQUIREMENTS**

Fines, costs, and restitution information can be located online through the Court of Common Pleas System (CPCMS) at [HTTP://UJSPORTAL.PACOURTS.US](http://UJSPORTAL.PACOURTS.US)

Please follow these instructions once you have gone to the website above.

- Click E-Services
- Select and click Public Web Docket Sheets
- Click on Common Pleas
- Click on Other Criteria
- Enter Last Name
- Enter First Name
- Select Lancaster County
- Select Criminal for the docket type
- Click Search
- Select appropriate case from the results of the Search. Then scroll through the pages until you reach the financial information.

If at any time you are having trouble accessing this data, feel free to contact the Collections Enforcement Unit at 717-824-8539 for balance information, Monday-Friday 8:30am - 5:00pm.

**FINANCIAL REQUIREMENTS**

- A. I will enter into a payment plan upon my first meeting with my probation officer to pay my court ordered fines, court costs, restitution, supervision fees of \$25 per month, and administrative fees of \$30 per month.
- B. My supervision may be violated for failure to comply with payment of my court ordered financial obligations.
- C. I am responsible to make all payments consistently and once a wage assignment has been issued, I am responsible to make all payments until my employer deducts it from my paycheck completely.
- D. I must report any changes in address or employment within 72 hours to the Collections Enforcement Unit.
- E. If at any time I am unable to work due to a medical condition, I must provide verification of said condition to the Collections Enforcement Unit immediately. This includes a letter from my physician indicating specific work restrictions and duration of restrictions.
- F. It is my responsibility to submit requests to waive past/future supervision fees to the Collections Enforcement Unit. A waiver form must be completed detailing the reasons for inability to pay pursuant to Act 35 of 1991 and accompanied by appropriate supporting documentation. An itemized list of circumstances and factors for the waiver of supervision fees is available upon request. Any request for waiver must be submitted within 30 days of its effective date.
- G. If I wish to modify a payment plan, I will put my request in writing to the assigned probation officer in the Collections Enforcement Unit.
- H. Failure to comply with my payment plan may result in contempt of court and the following sanctions may apply: violation of IPP/Probation/Parole supervision, suspension of driver's license, report to a credit bureau, report to a collections agency resulting in a 25% increase in your balance, issuance of a bench warrant, incarceration.
- I. I will follow the prescribed method(s) of payment described below.

**ALL PAYMENTS MUST INCLUDE YOUR SOCIAL SECURITY NUMBER AND INFORMATION NUMBER.**

<u>IN PERSON AT</u>	<u>MAILED TO</u>	<u>ONLINE PAYMENTS</u>
<b>BUREAU OF COLLECTIONS ADULT PROBATION &amp; PAROLE SERVICES 40 E. KING STREET LANCASTER, PA 17602 717-824-8539</b>	<b>BUREAU OF COLLECTIONS ADULT PROBATION &amp; PAROLE SERVICES P.O. BOX 8348 LANCASTER, PA 17608-3480</b>	<b>LOG ONTO <a href="http://UJSPORTAL.PACOURTS.US">HTTP://UJSPORTAL.PACOURTS.US</a> AND CLICK ON PAEPAY TAB AND FOLLOW THE DIRECTIONS TO PAY ON YOUR COMMON PLEAS CASE(S).</b>

Probation/parole is granted with the full understanding that I am in the legal custody of the Lancaster County Court of Common Pleas until the expiration of my maximum sentence or until such time as I am legally discharged. If it is alleged that I have violated the terms of my probation and/or parole the court has the authority to detain me, and prevent my release from prison pending further action by the court.

The court of common pleas has the authority to recommit me to serve the entire balance of the unserved maximum term of incarceration as a parole violator for the commission of criminal conduct, or for the violation of any other rule, regulation, or special condition of sentence during my parole supervision, with no credit given for the time spent at liberty on parole.

In the event that I am returned to court for a violation of probation based upon the commission of criminal conduct, or for the violation of any other rule, regulation or special condition of sentence while on probation, the sentencing alternatives available to the court of common pleas are the same as were available at the time of initial sentencing.

If I am accepted for supervision by the Pennsylvania Board of Probation and Parole, I will comply with all General Conditions of Special Probation as set forth in 37 Pa. Code § 65.4.

If responsibility for supervision of the term of sentence on the above captioned information number(s) is transferred to another county within the Commonwealth of Pa., or to another state, I will abide by the conditions of supervision authorized and imposed for use in that jurisdiction, as well as all conditions imposed by this Court at the time of disposition.

**WAIVER OF EXTRADITION**

**In the event that I am ever charged with a violation of my probation or parole, I expressly waive extradition to the Commonwealth of Pennsylvania from any jurisdiction inside or outside of the United States of America where I may be found and I shall not contest the efforts of any jurisdiction to return me to the United States or to the Commonwealth of Pennsylvania.**

**ACKNOWLEDGMENT**

**I hereby acknowledge that I have read, or have had read to me the foregoing rules, regulations and special conditions of my probation/parole. I fully understand and agree to follow the rules and I understand the penalties should I be found in violation.**

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Probationer/Parolee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

During the course of supervision, if I believe that my rights as a probationer/parolee have been violated by an employee of Lancaster County Adult Probation and Parole Services, I may file a written complaint to his/her immediate supervisor who will investigate the complaint and respond in writing. If I feel the need for further appeal, I am to proceed in a similar fashion according to the chain of command in the department.