

**DISTRICT ATTORNEY'S OFFICE OF CHESTER COUNTY
201 WEST MARKET STREET
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WEST CHESTER, PENNSYLVANIA 19380-0989
TELEPHONE: (610) 344-6801
FAX: (610) 344-5905
ARD DEPARTMENT: (610) 344-6843 or (610) 344-6839**

ACCELERATED REHABILITATIVE DISPOSITION (ARD)

After criminal proceedings in a court case have been instituted, the District Attorney's Office of Chester County, upon application from the defendant, may request that the Court of Common Pleas of Chester County consider the case for the Accelerated Rehabilitative Disposition (ARD) Program. The primary purpose of the ARD Program is the prompt disposition of charges, eliminating the need for costly and time consuming trials and other court proceedings. The ARD Program is available to certain carefully screened defendants, ordinarily first offenders, who lend themselves to treatment and rehabilitation rather than punishment, and who are unlikely to commit another crime.

The defendant will be considered for participation in the ARD Program, if the defendant has no history of prior delinquency or criminal activity, or has led a law-abiding life for a substantial period of time before the commission of the present crime. The defendant cannot be charged with a crime which involves firearms, drugs, violence, serious injury, offenses against the elderly or children, sexual offenses, or a breach of the public trust. The police officer involved with the case will have the opportunity to offer prior comment on the defendant's admission into the ARD Program. The victim of the crime will also have the opportunity to offer prior comment on the defendant's admission into the ARD Program, including the submission of a written victim impact statement detailing the physical, psychological and economic effects of the crime on the victim and the victim's family. The District Attorney's Office may also determine that there are other circumstances concerning the case or the defendant which disqualify the defendant from participation in the ARD Program. There is no right to participate in the ARD Program and eligibility is determined on a case-by-case basis, and is within the discretion of the District Attorney's Office.

Acceptance into and satisfactory completion of the ARD Program offers the defendant an opportunity to earn a clean record and dismissal of the pending charges. However, should the defendant fail to satisfactorily complete the ARD Program, the defendant will be removed from the ARD Program and will be prosecuted as provided by law.

DRIVING UNDER THE INFLUENCE - ARD PROGRAM

For defendants, who are charged with Driving Under the Influence, a DUI-ARD Program has been instituted which allows an ARD application to be processed more quickly.

Defendants, who are charged with DUI, to be eligible for this program, must do the following: (1) apply for the DUI-ARD Program at their preliminary hearing, (2) waive the preliminary hearing, (3) waive formal arraignment, and (4) waive the filing of a criminal information.

The Assistant District Attorney, at the preliminary hearing, will give the defendant an ARD hearing date before the Court of Common Pleas of Chester County. The ARD hearing date will be approximately eight weeks from the day the DUI-ARD application is completed.

The defendant's DUI-ARD application will be reviewed by the ARD Department of the District Attorney's Office. If the defendant's DUI-ARD application is approved, the ARD hearing will be held as scheduled. If the defendant's DUI-ARD application is denied, the ARD hearing date will become the defendant's formal arraignment date. A criminal information will then be filed, and the defendant will be prosecuted as provided by law. The defendant will be notified by the ARD Department when the DUI-ARD application is approved or denied.

If the defendant's DUI-ARD application is approved, and the defendant fails to enter the DUI-ARD Program on the scheduled hearing date, the defendant's ARD approval may be revoked, or the defendant may receive additional license suspension and/or community service, or suffer other penalties.

SUMMARY OFFENSES AND THE DUI-ARD PROGRAM

DUI-ARD defendants must also waive the preliminary hearing for all vehicle code summary offenses involving Title, Registration, Licensing, Vehicle Equipment Standards, and Inspection Requirements. In most cases, defendants accepted into the DUI-ARD Program must plead guilty to these summary offenses. DUI-ARD defendants must also waive the preliminary hearing for all non-vehicle code summary offenses. In most cases, defendants accepted into the DUI-ARD Program must plead guilty to these summary offenses.

DUI-ARD defendants must also waive the preliminary hearing for all vehicle code summary offenses involving the Operation of Vehicles. Defendants accepted into the DUI-ARD Program may be required to plead to some or all of these summary offenses, depending upon the circumstances of the particular case. Any summary offense to which a DUI-ARD defendant is not required to plead guilty will be dismissed at the time the defendant successfully completes the DUI-ARD Program.

THE DEFENDANT IS NOT ENTITLED TO A REMAND FOR A PRELIMINARY HEARING ON EITHER DUI OR NON-DUI CASES.

LICENSE SUSPENSIONS FOR DUI-ARD CASES

Acceptance into the ARD Program for a charge of DUI will result in the defendant's license being suspended based on the formula outlined below.

(Revised August 11, 2010)

License suspension chart:

If driving underage – 90 days license suspension

If BAC is .08 - .099 – no license suspension

If BAC is .10 - .159 – 30 days license suspension

If BAC is .16 - .299 – 60 days license suspension

If BAC is .30 or over – 60 days license suspension and 1 year guardian interlock

If BAC is unknown or defendant is charged with Driving Under the Influence of Drugs

– 60 days suspension

If defendant has an accident involving bodily injury or property damage or vehicle damage

– 60 days suspension

Community Service

Everyone is assigned 50 hours of Community Service. If COAD and the prescribed treatment program, or twelve sessions toward the successful completion of such treatment at a state licensed addiction treatment provider, is completed within 60 days of an ARD hearing, the Community Service will be waived (there is no pro-rating i.e. either COAD is completed within 60 days in full or you do all 50 hours of Community Service). Underage defendants will receive at least an additional 50 hours of non-waivable Community Service.

Community Service may be increased based on a variety of factors including but not limited to the facts of the case, any prior criminal record that does not already disqualify someone from participating in the ARD Program, driving record or any other appropriate factor.

There will be no ARD in the following circumstances:

1. **IF THE DEFENDANT DOES NOT WAIVE HIS PRELIMINARY HEARING AND ANY AND ALL PRE-TRIAL MOTIONS. THIS INCLUDES DUI AND NON-DUI CASES.**
2. If defendant has a prior ARD/conviction within the prior 10 years.
3. If defendant has more than one prior DUI, ARD, Juvenile adjudication or any other conviction at any time.
4. If defendant has any prior felony convictions at any time.
5. If an accident occurred with the offense where a person other than defendant was killed or suffered serious bodily injury.
6. If a person under the age of 14 was present in defendant's car at the time of arrest.
7. If defendant has a poor driving record.
8. If defendant does not answer truthfully to the section of this application dealing with prior criminal history.
9. If defendant drives at speeds of 100 miles per hour or more.
10. This list is not exclusive. The District Attorney's Office in its discretion may also determine there are other factors that disqualify a defendant from participating in the ARD Program.

REQUIREMENTS FOR ALL DUI-ARD CANDIDATES

All DUI defendants, offered the ARD Program, **must** immediately contact the Chester County Council On Addictive Diseases (COAD) to set up an appointment.

COAD
Whiteland Business Park
930 East Lancaster Avenue
Exton, Pennsylvania 19341
(610) 363-6164

As part of the DUI-ARD Program defendants must be evaluated by COAD to determine the extent of their involvement with alcohol and/or controlled substances, and to assist in determining what conditions of the DUI-ARD Program would benefit them and the public.

As part of the DUI-ARD Program defendants must successfully complete any prescribed treatment program recommended by COAD.

As part of the DUI-ARD Program defendants must attend and successfully complete an approved alcohol highway safety school.

A FEE OF \$250.00 MUST BE PAID TO COAD BEFORE THE MORNING OF THE DEFENDANT'S SCHEDULED ARD HEARING.

NO DEFENDANT WILL BE PLACED IN THE ARD PROGRAM UNTIL THIS FEE IS PAID.

If treatment is recommended by COAD, the minimum program will be 12 outpatient sessions at a state licensed facility costing approximately \$400.00.

Additional conditions of the DUI-ARD Program may be such as may be imposed with respect to probation after conviction of a crime, including restitution. Failure to comply with any of these requirements is grounds for removal from the DUI-ARD Program.

Restitution is an important component of the DUI-ARD Program. DUI defendants will be expected to compensate the victim(s) of their criminal conduct for any damage or injury sustained. In those cases where the amount of restitution is not known at the time the defendant's DUI-ARD application is approved, the defendant will be informed as to the amount of restitution at a later date.

The length of the DUI-ARD Program will be one year for defendants with a BAC of .30 or greater, and six months for all others.

The defendant should not drink any alcoholic beverages the day of the ARD hearing. If the Probation Officer deems it necessary, the defendant must submit to a portable breath test and/or drug test on the day of the ARD hearing.

REQUIREMENTS FOR ALL NON-DUI ARD CANDIDATES

As part of the NON-DUI ARD Program, defendants must perform community service. The amount of community service will depend upon the nature of the case. The earlier a defendant applies for the NON-DUI ARD Program, the lower the amount of community service that must be performed. Delay of the ARD process, violation of any ARD procedures, bail conditions, prior criminal history or ARD disposition, not resulting in an ARD denial, will result in an increase in the amount of community service that must be performed. Additional conditions of the NON-DUI ARD Program may be such as may be imposed with respect to probation after conviction of a crime, including restitution. Restitution is an important component of the NON-ARD Program. Defendants will be expected to compensate the victim(s) of their criminal conduct for any damage or injury sustained. The length of the NON-DUI ARD Program shall not exceed two years. Failure to comply with any of these requirements is grounds for removal from the NON-DUI ARD Program.

COMPLIANCE WITH BAIL CONDITIONS

All defendants must contact the Chester County Bail Agency within 24 hours of applying for the ARD Program, and must comply with all bail conditions. Violation of any bail condition can result in the defendant's ARD application being denied. Violation of any bail condition, not resulting in an ARD denial, will result in an increase in the defendant's license suspension and/or community service that must be performed.

CHESTER COUNTY BAIL AGENCY

201 West Market Street

Suite 2300, 2nd Floor

P.O. Box 2746

West Chester, PA 19380-0989

(610) 344-6886

YOU SHOULD HAVE AN ATTORNEY

To ensure that your rights are protected, we recommend you obtain an attorney to represent you. If you are without sufficient financial resources to employ an attorney, you should immediately make application to the Chester County Public Defender.

CHESTER COUNTY PUBLIC DEFENDER

201 West Market Street

Suite 2325, 2nd Floor

West Chester, PA 19380-0989

(610) 344-6940

APPROXIMATE COSTS FOR ALL ARD CANDIDATES

COURT	DUI		NON-DUI	DUI-DRUG
ACT 30 – 2007		\$50.00 \$5	0.00	\$50.00
ACT 198		\$100.00	xxxxxx	\$100.00
DA ADMINISTRATION FEE		\$240.00	\$240.00	\$240.00
DISTRICT JUSTICE COURT COSTS		@ \$20.50	@ \$20.50	@ \$20.50
COMMON PLEAS COURT COSTS		@ \$65.00	@ \$65.00	@ \$65.00
STATE COSTS		@ \$7.00	@ \$7.00	@ \$7.00
ARD ADMINISTRATION FEE		\$150.00	\$150.00	\$150.00
ADULT PROBATION SUPERVISION FEE	\$240.00 (6 mos.)	\$480.00 (12 mos.)	\$480.00	\$480.00
CRIME VICTIM'S COMPENSATION FEE		\$60.00	\$60.00	\$60.00
EMERGENCY MEDICAL SERVICES (EMS) FEE		\$25.00	xxxxxx	\$25.00
CATASTROPHIC LOSS BENEFITS CONTINUATION FUND		\$50.00	xxxxxx	\$50.00
LABORATORY USER FEE		\$134.00	xxxxxx	\$175.00
COUNCIL ON ADDICTIVE DISEASES (COAD) FEE		\$250.00	xxxxxx	\$250.00
APPROXIMATE TOTAL COSTS				
	\$1,416.50 (6 mos.)	\$1,656.50 (12 mos.)	\$1,072.50	\$1,672.50

@ District Justice, Common Pleas, and State Court costs vary depending upon the number and type of charges.

As a condition of acceptance into the ARD Program for a charge of Driving Under the Influence, the defendant may be required to plead guilty to certain summary offenses. This will result in additional fines and costs.

If treatment is recommended by COAD, the minimum program will be 12 outpatient sessions at a state licensed addiction treatment provider costing approximately \$400.00.

** Costs for ARD-Drug Court do not include treatment fees, which will be assessed, as needed, by the treatment provider.

The \$250.00 COAD fee must be paid directly to COAD before the morning of the defendant's scheduled ARD hearing. All other fees and costs must be paid in full on or before the morning of the defendant's scheduled ARD hearing. ARD candidates who have not paid all of the above fees and costs in full, on or before the morning of the defendant's scheduled ARD hearing, will not be admitted into the ARD Program, without the consent of the District Attorney's Office and the approval of the court. The Collection Unit of the Adult Probation Department does accept Visa, MasterCard, and MAC.

**FOR INFORMATION ON THE ACTUAL COST OF YOUR ARD PROGRAM CALL
THE COLLECTION UNIT OF ADULT PROBATION (610) 344-6211 OR 610-344-6212.**

**CHESTER COUNTY ARD APPLICATION
CHECK ARD PROGRAM YOU ARE APPLYING FOR:**

_____ **DUI-ARD PROGRAM**

_____ **NON-DUI ARD PROGRAM**

_____ **COMBINATION DUI-ARD AND DRUG COURT
PROGRAM -YOU MUST ALSO COMPLETE THE DRUG COURT
APPLICATION FOR THE COMBINATION PROGRAM.**

Read each question carefully before answering. Failure to complete all required ARD forms accurately will delay the processing of your ARD application, and will result in your ARD application being denied, or your removal from the ARD Program. False or misleading information will be treated as a false statement subjecting you to further prosecution. This application must be completed by all candidates for both ARD Programs. In addition, all candidates for both ARD Programs must complete the applicable sections of the Accelerated Rehabilitative Disposition Colloquy.

PART I: BACKGROUND INFORMATION

1. Full Name _____
(first) (middle) (last)

Maiden Name _____

2. Date of Birth _____ Age _____

3. Place of Birth _____
(city) (county) (state)

4. Sex: Male _____ Female _____ Race _____

5. Social Security Number _____

6. Operator's License Number _____ State _____

a. Prior Operator's License(s) State _____ Number(s) _____

7. Phone: (home) _____ (work) _____

8. Home Address _____

9. Occupation or Employer _____

10. Work Address _____

11. Average Net Weekly Salary _____

12. Marital Status _____

13. Name of Spouse _____

14. Name(s) and Age(s) of Children _____

15. Are you a citizen of the United States? If not, attach a copy of passport and visa.

16. If this case involves an accident, what is the name of your Insurance Company? _____

Insurance Policy Number? _____

If a claim has been filed, what is the status of this claim? _____

17. Is an interpreter needed for the ARD hearing? _____
If so, what language? _____

Obtaining an interpreter is the responsibility of the applicant and/or his attorney.

18. Are you represented by counsel? _____ (yes or no). If yes,
Counsel's Name _____
Address _____

Phone _____

PART III. VERIFICATION OF ARD APPLICATION

I hereby swear (or affirm) that I have read the above application for admission to the ARD Program in its entirety and I understand its full meaning.

I hereby swear (or affirm) that each and every answer to the above questions are true. I hereby swear (or affirm) that I fully understand that if any of the information provided above is false or misleading, my application for admission to the ARD Program will be denied and my case will be prosecuted as provided by law.

I hereby swear (or affirm) that I fully understand that providing false or misleading information may also result in my being charged and prosecuted for additional crimes, including but not limited to, perjury, false swearing, and/or, unsworn falsification to authorities.

DATE

SIGNATURE OF DEFENDANT

SWORN TO AND SUBSCRIBED BEFORE ME THIS

_____ DAY OF _____, 20 _____.

As attorney for the above defendant, I have advised the defendant of (his/her) rights with respect to the charges against (him/her). I have also advised the defendant of the contents and meaning of this application for admission into the ARD Program. I verify that it is my belief that the defendant understands the rights which (he/she) is waiving. I also verify that it is my belief that the defendant understands the contents and meaning of this application for admission into the ARD Program and the requirements of the ARD Program.

DATE

SIGNATURE OF DEFENDANT'S COUNSEL

COMMONWEALTH OF PENNSYLVANIA : IN THE COURT OF COMMON PLEAS
VS. : CHESTER COUNTY, PENNSYLVANIA
: CRIMINAL ACTION
: NO. _____
ARD DEPARTMENT WILL ADD TERM NO.

DEFENDANT

OTN

ACCELERATED REHABILITATIVE DISPOSITION COLLOQUY

EXPLANATION OF THE ARD PROGRAM AND WAIVER OF RIGHTS MUST BE COMPLETED BY ALL ARD CANDIDATES

1. Do you understand that acceptance into and satisfactory completion of the ARD Program offers you an opportunity to earn a dismissal of the pending charges? _____
2. Do you understand that the conditions of the ARD Program may be such as may be imposed with respect to probation after conviction of a crime, including restitution, and that the conditions of the program will include the imposition of costs, and the imposition of a reasonable charge relating to the expense of administering the program, and other such conditions that are considered appropriate? _____
3. Do you understand that the length of the ARD Program shall not exceed six months for DUI cases and two years for Non-DUI cases? _____
4. Do you understand that should you fail to complete the ARD Program satisfactorily, you will be removed from the ARD Program and will be prosecuted as provided by law? _____
5. Do you understand that you have a Constitutional right to a speedy trial, and that pursuant to Pennsylvania Rule of Criminal Procedure 600, the Commonwealth must bring your case to trial within 365 days from the date of the filing of the criminal complaint charging you, and that if your case is not brought to trial within 365 days from the filing of the criminal complaint, you can ask the court to dismiss all charges against you? _____
6. Do you understand that, if accepted into that ARD Program, you must waive the appropriate statute of limitations and your right to a speedy trial under any applicable Federal or State Constitutional provisions, statutes or rules of Court from the day you sign this application for admission in to the ARD Program until you either satisfactorily complete the ARD Program or until the last scheduled day of the criminal trial week next following the date you are removed from it? _____
7. Do you understand that, if you are not accepted into the ARD Program, you must waive the appropriate statute of limitations and your right to a speedy trial under any applicable Federal or State Constitutional provisions, statutes or rules of Court from the date you sign this application for admission into the ARD Program until the last scheduled day of the criminal trial week next following the date of your rejection? _____
8. Do you agree to waive the appropriate statute of limitations and your right to a speedy trial under any applicable Federal or State Constitutional provisions, statutes or rules of Court, as described in questions 5, 6 and 7? _____

9. Do you understand that if you fail to complete the ARD Program satisfactorily, and you are removed from the ARD Program pursuant to Pennsylvania Rule of Criminal Procedure 184, the Commonwealth must bring your case to trial within 120 days from the date of the termination Order if you are incarcerated on this case, or 365 days from the date of the termination order if you have been released on bail? _____

10. Do you understand that while your ARD application is being processed your case may be listed for trial by being placed on the criminal trial list, and if that happens, your ARD application will act as a continuance request, so that the ARD process can be completed? _____

11. Do you agree that your ARD application will act as a continuance request, if your case is listed for trial, so that the ARD process can be completed? _____

12. Do you understand that Pennsylvania Rule of Criminal Procedure 304 permits you, or your attorney, to serve a written request for a Bill of Particulars upon the District Attorney of Chester County within seven (7) days from your arraignment date? The request must set forth the specific particulars sought by you and the reasons why the particulars are requested? _____

13. Do you understand that Pennsylvania Rule of Criminal Procedure 305 permits you, or your attorney, to file a formal Motion for Pretrial Discovery and Inspection within fourteen (14) days from your arraignment date? _____

14. Do you understand that Pennsylvania Rule of Criminal Procedure 307 permits you or your attorney, to file an Omnibus Pretrial Motion for Relief which must be filed and served within thirty (30) days after your arraignment date, unless opportunity therefore did not exist, or you, or your attorney, or the District Attorney, was not aware of the grounds for the motion, or unless the time for filing has been extended by the Court for cause shown? _____

15. Do you understand that Pennsylvania Rule of Criminal Procedure 306 sets forth the required procedure to be followed when filing an Omnibus Pretrial Motion for Relief? Types of relief requested in such a pretrial motion include , but are not limited to, the following: (1) Continuance; (2) Severance; (3) Suppression of Evidence; (4) Psychiatric Examination; (5) Quash the Information; (6) Change of Venue; (7) Disqualify a Judge; (8) Appointment of Investigator; (9) Pretrial Conference? _____

16. Do you understand that to ensure that your rights are protected, we recommend you obtain an attorney to represent you, and that if you are without sufficient financial resources to employ an attorney, you can make application to the Chester County Public Defender? _____

17. Do you understand that your failure to complete all the required ARD forms accurately will result in your ARD application being denied, or your removal from the ARD Program? _____

18. Do you understand that you have a continuing obligation to report any contacts with the criminal justice system that occur after the filing of your ARD application, and your failure to do so will result in your ARD application being denied, or your removal from the ARD Program? _____

**EXPLANATION OF THE DUI-ARD PROGRAM MUST BE COMPLETED BY ALLARD
CANDIDATES CHARGED WITH DUI**

19. Do you understand that acceptance into the ARD Program for a charge of Driving Under the Influence shall be considered a first conviction for the purpose of computing whether a subsequent conviction for driving under the influence shall be considered a second, third, fourth, or subsequent conviction? _____

20. Do you understand that, in addition to any other requirements, if you are applying for the ARD Program for a charge of Driving under the influence, as part of the ARD Program you must be evaluated by the Chester County Council on Addictive Diseases (COAD) to determine the extent of your involvement with alcohol and/or controlled substances, and to assist in determining what conditions of the ARD Program would benefit you and the public? _____

21. Do you understand that, in addition to any other requirements, if you are applying for the ARD Program for a charge of Driving Under the Influence, as part of the ARD Program you must successfully complete any prescribed treatment program COAD recommends? _____

22. Do you understand that, in addition to any other requirements, if you are applying for the ARD Program for a charge of Driving Under the Influence, as part of the ARD Program you must attend and successfully complete an approved alcohol highway safety school? _____

23. **For Combined ARD – Drug Court Program:** Do you understand that you must successfully complete both the ARD and Drug Court Programs and that failure to successfully complete either program will result in your removal from both programs? _____

VERIFICATION OF ARD -COLLOQUY

I hereby swear (or affirm) that I have read the explanation of the ARD Program and waiver of rights in its entirety and I understand its full meaning.

I hereby swear (or affirm) that each and every answer to the above questions is true. I hereby swear (or affirm) that I fully understand that if any of the information provided above is false or misleading, my application for admission to the ARD Program will be denied and my case will be prosecuted as provided by law.

I hereby swear (or affirm) that I fully understand that providing false or misleading information may also result in my being charged and prosecuted for additional crimes, including but not limited to, perjury, false swearing, and/or, unsworn falsification to authorities.

DATE

SIGNATURE OF DEFENDANT

SWORN TO AND SUBSCRIBED BEFORE ME THIS

_____ DAY OF _____, 20 _____.

As attorney for the above defendant, I have advised the defendant of (his/her) rights with respect to the charges against (him/her). I have also advised the defendant of the contents and meaning of the explanation of the ARD Program and waiver of rights. I verify that it is my belief that the defendant understands the rights which (he/she) is waiving. I also verify that it is my belief that the defendant understands the contents and meaning of this application for admission into the ARD Program and the requirements of the ARD Program.

DATE

SIGNATURE OF DEFENDANT'S COUNSEL