



# ALLEGHENY COUNTY SHERIFF'S OFFICE

WILLIAM P. MULLEN,  
SHERIFF

KEVIN M. KRAUS,  
CHIEF DEPUTY

## 90 DAY PFA WEAPON DISCLAIMER

436 GRANT STREET, COURTHOUSE - ROOM 111, PITTSBURGH, PENNSYLVANIA 15219  
INVESTIGATIONS DIVISION: PHONE - 412.350.4709 / FAX - 412.350.3021

### IMPORTANT NOTICE

**Please read this notice carefully as your property may be destroyed.**

Pursuant to Title 23 Pa. C.S.A. § 6108, all firearms and/or weapons listed on the attached Firearms Confiscation Form / Property Receipt will be held by the Sheriff of Allegheny County due to a Protection From Abuse Order (PFA) issued against you. These firearms and/or weapons will be held for safekeeping until the expiration of the PFA or until the Sheriff receives an Order of Court authorizing their return.

**You must retrieve your firearms from the Sheriff within ninety (90) days after the PFA Order's expiration. After the 90 day period has passed, the Sheriff will treat these weapons as abandoned and may seek an Order of Court authorizing their disposal / destruction without further notice to you.**

In order to retrieve your property, you must contact the Allegheny County Sheriff's Office and an appointment will be scheduled for the return of your property. The PFA order must be expired and all court action related to the PFA has been vacated before a Sheriff's Evidence Custodian can begin to process the return of your property.

It is YOUR responsibility to retrieve your firearms and/or weapons after the PFA expires or they will be treated as abandoned and will be scheduled for disposal / destruction.

If you have any objection to the provisions listed above in this order, you must appeal in writing within thirty (30) days from the date of this notice.

Dated: \_\_\_\_\_

William P. Mullen,  
Sheriff of Allegheny County

To be signed by the owner or possessor of the property described in the attached Firearms Confiscation Form / Property Receipt.

By signing this form, I acknowledge the receipt of this notice.

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
Witness or Police Officer (SIGNATURE)

\_\_\_\_\_  
(PRINT NAME)

\_\_\_\_\_  
Witness or Police Officer (PRINT NAME)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date