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**TO: Assignment Judges
Criminal Presiding Judges** **Directive #09-19**
**[supersedes Directive #14-05
and All Supplements
to that Directive]**

FROM: Glenn A. Grant, J.A.D. 

SUBJ: Criminal – Updated Pretrial Intervention (PTI) Forms

DATE: June 4, 2019

This Directive supersedes Directive #14-05 “Standardized Pretrial Intervention Program (PTI) Forms” (issued October 4, 2005), and the two Supplements to that Directive. Directive #14-05 and the January 2, 2007 Supplement promulgated a number of standard forms for processing PTI cases through the Criminal and Probation Divisions. The October 19, 2018 Supplement issued an updated PTI Application. This Directive promulgates updates to all of those prior forms necessitated by the adoption of the new PTI rules (R. 3:28-1 through 3:28-10), effective July 1, 2018, and revised effective September 1, 2018. The appended forms replace all prior versions and should be used beginning June 14, 2019.

The modifications to the forms are as follows: (1) the PTI Application was updated to remove the place of birth question; and (2) six PTI forms were updated to reference conditions of release where appropriate, include terminology contained in the rules, and stylistic changes were made for consistency. Specifically, in addition to the revised Application, the six revised forms appended to this Directive are as follows: (1) PTI Order of Postponement, (2) PTI Standard Conditions of PTI Supervision, (3) PTI Special Conditions of PTI Supervision, (4) PTI Order of Termination, (5) PTI Order of Dismissal, and (6) PTI Order of Dismissal, Order to Discharge Bail, and Order of Entry of Civil Judgment by Confession.

Additionally, the corresponding changes to the three forms prepared and stored in the web-based application called the Criminal Case Management (CCM) System will be implemented on June 14, 2019. Specifically, the three forms in the CCM System are as follows: (1) the PTI Order of Postponement, (2) the PTI Standard Conditions of PTI Supervision, and (3) the PTI Special Conditions of PTI Supervision. The “Additional Conditions or Comments” field on the PTI Special Conditions form has also been expanded to permit more information to be included, if appropriate.

Any questions regarding Directive #09-19 may be directed to Assistant Director Sue Callaghan via email at sue.callaghan@njcourts.gov or via phone at 609-815-2900 ext. 55300.

G.A.G.

Attachments (PTI Application and PTI forms)

cc:	Chief Justice Stuart Rabner	Clerks of Courts
	Attorney General Gurbir S. Grewal	Trial Court Administrators
	Public Defender Joseph E. Krakora	Special Assistants
	Criminal Division Judges	Criminal Division Managers and Assistants
	Family Division Judges	Family Division Managers
	Municipal Presiding Judges	Municipal Division Managers
	Veronica Allende, Director, DCJ	Vicinage Chief Probation Officers
	Steven D. Bonville, Chief of Staff	Vance Hagins, Chief, Criminal Practice
	AOC Directors and Assistant Directors	Maria Pogue, Assistant Chief, Criminal Practice

ATTACHMENT 1
PTI APPLICATION



**Superior Court of New Jersey
Criminal Division
Pretrial Intervention Program Application**

Name					
Last Name		First Name		Middle Initial	
Other Names Used					
Residence					
Street		Apt #	Town	State	Zip
Telephone		Cell Phone	Date of Birth	Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Interpreter Needed? If yes, indicate language:					<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Contact Name		Telephone		Relationship	
Present Status					
In custody? If yes, where:					<input type="checkbox"/> Yes <input type="checkbox"/> No
I. Prior Diversion Ineligibility					
Have you ever been enrolled in a program of pretrial intervention, been placed into supervisory treatment under the conditional discharge statute (N.J.S.A. 24:21-27 or 2C:36A-1), or the conditional dismissal program (N.J.S.A. 2C:43-13.1 <i>et seq.</i>), or been granted a dismissal due to successful participation in the Veterans Diversion Program (N.J.S.A. 2C:43-23 <i>et seq.</i>), or enrolled in a diversionary program under the laws of any other state or the United States for a felony or indictable offense? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, specify what program:					
<input type="checkbox"/> Pretrial Intervention <input type="checkbox"/> Conditional Discharge <input type="checkbox"/> Conditional Dismissal <input type="checkbox"/> Veterans Diversion Program					
<input type="checkbox"/> Other Please provide the name of the program _____ The State or Federal court where it was ordered _____ The indictable offense or felony you were charged with _____					
If the answer to this question is Yes, you are ineligible to apply to this program.					
II. Current Charges					
Complaint/Accusation/Indictment No.			Promis/Gavel No.		
Name of co-defendant(s), if any					
Charge(s)					
Are you charged with a crime(s) that has a presumption of incarceration or a mandatory minimum period of parole ineligibility? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, you must include a separate page with this application that includes compelling reasons that justify consideration of this application.					
Did you attach a separate page to this application?					<input type="checkbox"/> Yes <input type="checkbox"/> No
Did the prosecutor consent to consider your application?					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown

III. Prior Criminal Record

Do you have a prior indictable/felony conviction in this State, another State, or the United States? Yes No
If yes, where:

If yes, **you must include a separate page** with this application that includes compelling reasons that justify consideration of this application.

Did you attach a separate page to this application? Yes No
Did the prosecutor consent to consider your application? Yes No Unknown

IV. Charges with a Presumption Against Admission (N.J.S.A. 2C:43-12(b)(2))

1. You are a Public Officer or Employee and the charge(s) involved or touched your office or employment.
2. The charge(s) involve Domestic Violence, and (a) was committed when a temporary or final restraining order was in effect, or (b) the charge(s) involves violence or the threat of violence.
If either of the above apply, **you must include a separate page** with this application that includes compelling reasons that justify consideration of this application.
Did you attach a separate page to this application? Yes No

V. Representation

Do you have an attorney? Yes No
If yes: Private Attorney Public Defender Assigned

Attorney's Name Attorney's Address Telephone

Defense Attorney Signature Date

VI. Application Fee

There is a non-refundable \$75 application fee that must be submitted with this application unless the fee is waived by reason of verified inability to pay. Payments will be accepted in the form of cash, check or cashier's check. **"Starter" or temporary checks will be NOT be accepted.** Checks should be made out to *Treasurer, State of New Jersey*.
Payment should be made to the Finance Division at the county courthouse where the charges have been filed. The receipt must be submitted when the application is filed with the Criminal Division.

VII. Acknowledgment of Defendant

I acknowledge that I have read the Pretrial Intervention (PTI) Program Summary and understand the requirements of this program, and would like to be considered for enrollment to the PTI program.
I understand that if the prosecutor's consent to consider my application is required, my application will not be considered by the Criminal Division until: (1) a statement of compelling reasons is received by the Criminal Division; and (2) the prosecutor's consent is received in writing.
I understand that if compelling reasons are required to overcome a presumption against admission, failure to provide compelling reasons to the Criminal Division may result in rejection of my application.
I understand that if I want to challenge the prosecutor's decision not to consider my application, or a recommendation against enrollment by either the prosecutor or the criminal division manager or designee, that I must file a motion within 10 days of receipt of the rejection to the Presiding Judge of the Criminal Division, or judge to whom my case has been assigned.

Print Name of Defendant Signature of Defendant Date

Official Use Only

Defendant is Ineligible <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Prosecutor Consent Required <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Prosecutor Consented <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Statement Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<input type="checkbox"/> Fee Paid _____		<input type="checkbox"/> Fee Waived _____	

ATTACHMENT 2
PTI ORDER OF POSTPONEMENT



Pretrial Intervention Order of Postponement

State of New Jersey

1st Order

2nd Order

3rd Order

v

Address

Zip

County

PROMIS Number(s)

CAPS ID Number

Ind/Acc/Complaint Number(s), Charges and Statutes

Related Disorderly Persons and Motor Vehicle Charges

In accordance with the provisions of N.J.S.A. 2C:43-12 and -13 & R. 3:28-1 *et seq.*, and upon the recommendation of the Criminal Division Manager or designee and with the consent of the Prosecutor and defendant to the attached listed terms and conditions of the supervisory treatment, it is **ORDERED** that all further proceedings be and are postponed for a period of _____ months, beginning _____.

Date

Judge

Date

Prosecutor

Date

Criminal Division Manager or Designee/Vicinage Chief Probation Officer or Designee

I consent to the conditions set forth in the standard and special conditions. I agree to a postponement of further proceedings for a period not to exceed three years. During this period, I waive my right to a speedy trial on this or any related charges, including disorderly persons offenses and motor vehicle charges. In addition, I agree to waive any double jeopardy claim as to any remanded disorderly persons offenses and/or motor vehicle violations.

Date

Defendant

Date

Attorney

ATTACHMENT 3
PTI STANDARD CONDITIONS OF PTI SUPERVISION



Pretrial Intervention Standard Conditions of PTI Supervision

First Name	Middle Name	Last name
PROMIS Number(s)		CAPS ID Number

1. You shall obey all federal, state, and municipal laws and ordinances. You shall notify your probation officer within 24 hours if you are arrested or issued a complaint summons in any jurisdiction.
2. You shall report to your probation officer as directed.
3. You shall answer all inquiries by your probation officer truthfully.
4. You shall permit your probation officer to visit your residence or any other suitable place.
5. You shall promptly report any change of address or residence to your probation officer.
6. You must obtain permission if you wish to move outside the state.
7. You shall seek and maintain gainful employment, and promptly notify your probation officer when you change your place of employment or find yourself out of work.
8. You shall cooperate in any test, treatment and/or counseling deemed necessary by your probation officer during the PTI period of postponement.

If the court finds that you have not complied with the conditions of your PTI Supervision, the Court may modify the conditions of PTI Supervision, or terminate you from the program. If you are terminated from the PTI program, your charges will be reactivated and prosecution of the charges will resume. You may also be ordered to comply with conditions of pretrial release.

Failure to comply with the payment requirements may result in further Court action including termination, attachment of your wages, filing of a civil judgment, or extension of your PTI Supervision for purposes of collection.

I have received a copy of the Standard Conditions of PTI Supervision, which have been read and explained to me. I may request a copy of the official court order from my probation officer. I understand the above conditions of PTI Supervision and that they apply to me, and I further understand that failure to comply on my part constitutes a violation of PTI Supervision and may cause my termination from the program and prosecution of the charges against me.

Date	Defendant
Date	Probation Officer

ATTACHMENT 4
PTI SPECIAL CONDITIONS OF PTI SUPERVISION



Pretrial Intervention Special Conditions of PTI Supervision

First Name		Middle Name	Last Name
PROMIS Number(s)			CAPS ID Number
Community Service <input type="checkbox"/> Yes <input type="checkbox"/> No Hours: _____	Driver's License Suspension <input type="checkbox"/> Yes <input type="checkbox"/> No	License Number	Length of Suspension Months
Restitution in the Total Amount of: \$ _____	Payable Through: <input type="checkbox"/> Probation <input type="checkbox"/> Direct Pay	<input type="checkbox"/> Forfeit Weapons:	
Payable To:			
<input type="checkbox"/> Drug/alcohol testing and/or counseling as directed			
<input type="checkbox"/> Medical/psychological tests/evaluations and/or counseling as directed			
<input type="checkbox"/> Victims of Crime Compensation Office (VCCO) Assessment N.J.S.A. 2C:43-3.1(a)(2)(d) \$50.00		<input type="checkbox"/> Drug Enforcement and Demand Reduction (DEDR) Penalty N.J.S.A. 2C:35-15(a) \$ _____	
<input type="checkbox"/> Drug Abuse Education Fund (DAEF) Penalty N.J.S.A. 2C:43-3.5 \$50.00		<input type="checkbox"/> Forensic Lab Fee N.J.S.A. 2C:35-20(a) \$ _____	<input type="checkbox"/> Safe Neighborhoods Assessment N.J.S.A. 2C:43-3.2(a)(2) \$75.00
Additional Conditions or Comments			
My financial obligations imposed by the court total \$ _____			
<input type="checkbox"/> I agree to pay \$ _____ today.			
<input type="checkbox"/> I agree to make payments at the rate of \$ _____ per _____.			
<input type="checkbox"/> I agree to pay the total amount forthwith.			
<p>I have received a copy of the Special Conditions of PTI Supervision, which have been read and explained to me. I may request a copy of the official court order from my probation officer. I understand the conditions of PTI Supervision and that they apply to me, and I further understand that failure to comply on my part constitutes a violation of PTI Supervision and may cause my termination from the program and prosecution of the charges against me. I also understand that if I am terminated from the PTI program, I may be ordered to comply with conditions of pretrial release. I further understand that if the offenses for which I am being enrolled into PTI were committed on or after March 1995, I will be charged a fee each time I make a payment through probation.</p> <ul style="list-style-type: none"> • No fee on payments of \$3.00 or less • \$1.00 fee on payments of \$3.01 to \$9.99 • \$2.00 fee on payments of \$10.00 or more <p>You must report to _____ on _____ at _____.</p> <p>You must comply with all standard and special conditions of supervision imposed by the court.</p>			
Date	Defendant		
Date	Probation Officer		

ATTACHMENT 5
PTI ORDER OF TERMINATION

State of New Jersey

Superior Court of New Jersey

County

Complaint / Indictment / Accusation Number(s)

V.

PROMIS Number

CAPS ID Number

Probation Officer

Defendant

**Pretrial Intervention
Order of Termination**

Upon application of the Vicinage Chief Probation Officer for an Order terminating the defendant from participation in said program, and the defendant:

- having been notified to appear before this Court for a termination hearing and having not appeared,
- having appeared to contest such recommendation,
- having waived the opportunity to a termination hearing,

It is on this ____ day of _____, 20__.

ORDERED that the defendant is hereby terminated from participation in the Pretrial Intervention Program and the charges against the participant are reactivated and returned to the ordinary course of prosecution, and;

IT IS FURTHER ORDERED that all records relating to the defendant's application to and participation in said program, shall be considered confidential in accordance with R. 1:38-3(c)(5), and;

IT IS FURTHER ORDERED that the defendant be placed on the active court calendar, and is scheduled before Judge _____, in Courtroom ____ on _____ at ____ a.m./ p.m.

Judge of the Superior Court

Distribution:

Criminal Division	Defense Attorney
Probation Division	Defendant
Prosecutor	

ATTACHMENT 6
PTI ORDER OF DISMISSAL

State of New Jersey

Superior Court of New Jersey

County

Complaint / Indictment / Accusation Number(s)

V.

PROMIS Number

CAPS ID Number

Probation Officer

Defendant

Pretrial Intervention Order of Dismissal Under R. 3:28-7(b)(1)

Upon application of the Vicinage Chief Probation Officer for an Order to Dismiss the above captioned Complaint(s)/Indictment(s)/Accusation(s) pursuant to R. 3:28-7(b)(1) and with the consent of the Prosecutor and defendant;

The Court having considered the report of the Pretrial Intervention Program concerning the defendant's participation and noting that the defendant has released the complainant from any claims which might arise from failure to prosecute this matter in the ordinary course;

It is on this ____ day of _____, 20__, **ORDERED** that the Complaint(s)/ Indictment(s)/Accusation(s) is/are hereby dismissed without cost to the defendant.

IT IS FURTHER ORDERED that any bail posted be discharged.

Judge of the Superior Court

I hereby consent to the entry of the above Order.

Defendant

Prosecutor

Distribution:

Criminal Division

Finance Division

Probation Division

Prosecutor

Defense Attorney

Defendant

ATTACHMENT 7

**PTI ORDER OF DISMISSAL, ORDER TO DISCHARGE BAIL, AND
ORDER OF ENTRY OF CIVIL JUDGEMENT BY CONFESSION**

State of New Jersey

Superior Court of New Jersey

County

Complaint/Indictment/Accusation Number(s)

V.

PROMIS Number

CAPS ID Number

Probation Officer

Defendant

Pretrial Intervention Program

1) Order of Dismissal

2) Order to Discharge Bail

3) Order of Entry of Civil Judgment by Confession

Upon application of the Vicinage Chief Probation Officer for an Order to dismiss the above captioned Complaint(s)/Indictment(s)/Accusation(s) and having considered the report of the Pretrial Intervention Program concerning the defendant's participation and with consent of the Prosecutor and the defendant;

It is on this _____ day of _____, 20__, **ORDERED** that the Complaint(s)/Indictment(s)/Accusation(s) is/are hereby dismissed Pursuant to R. 3:28-7(b)(1) without cost to the defendant.

It is further **ORDERED** that any bail posted in this matter is discharged.

It is further **ORDERED** that, the defendant having given consent as a condition of the dismissal of charges, the Clerk of the Superior Court shall record this Order in the Civil Judgment and Order Docket pursuant to R. 4:101 as a Civil Judgment by Confession in favor of the _____ County Probation Division and against the defendant in the amount of _____.

Judge of the Superior Court

I hereby consent to the entry of this Order.

Defendant

Prosecutor

Attach Certification of Amount Due

Distribution: Criminal Division

Finance Division

Probation Division

Prosecutor

Defense Attorney

Defendant

**Probation Division in the
County of** _____
(Address)

State of New Jersey
Plaintiff

v.

Defendant _____
Street _____
City _____ State _____ Zip Code _____

For Superior Court Clerk's Office Use Only	
Date Entered:	_____
J#	_____

Superior Court Of New Jersey
_____ County
Law Division Criminal

Complaint/Indictment/Accusation Number(s)

Certification of Amount Due

When enrolled into the Pretrial Intervention Program the defendant agreed to pay \$_____ in financial obligations. Those obligations have not been paid in full. The amount(s) due are noted below.

The undersigned does hereby certify that the amount set forth below are due the Probation Division in the County of _____ on behalf of the below named creditors.

Names of Creditors	Types of Payment	Amount Due
Victims of Crimes Compensation Office	VCCO Assessment:	
Victim: _____	Restitution: _____	
Victim: _____	Restitution: _____	
Victim: _____	Restitution: _____	
_____	_____	
_____	_____	
_____	_____	

Total: _____

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Date: _____

Chief Probation Officer

Attach to Pretrial Intervention Order of Dismissal, Order to Discharge Bail and Order of Entry of Civil Judgment by Confession