



MINISTRY OF JUSTICE  
PRISON ADMINISTRATION DEPARTMENT  
GOVERNMENT REGIONAL OFFICE FOR LOMBARDY  
DIRECTION OF \_\_\_\_\_ PRISON

**ISTANZA DI RINVIO DELL'ESECUZIONE DELLA PENA E/O DI DETENZIONE  
DOMICILIARE IN LUOGO DEL DIFFERIMENTO**  
**APPLICATION FOR DEFERMENT OF SERVING THE SENTENCE AND/OR OF HOUSE ARREST  
INSTEAD OF DEFERMENT**

To the Supervising Judge of  
**BRESCIA**

I, the undersigned,

Surname and name

Born in

on

(Municipality/Province)

(Date)

Residence

(street/Square, n°, City, zip)

Currently detained at

with final juridical position

following a conviction for the following crimes

1)  **4 bis O.P.**

such as:

date of commission

place of commission

2)  **no 4 bis O.P.**

such as:

date of commission

place of commission

to a sentence of:

years

months

days

out of which, already served

years

months

days

to have served the sentence for the crime/s provided for in art. **4 bis O.P.**:

YES

NO

to have a residual sentence of:  years  months  days   
 end of sentence:

**ASKS**

With regard to the sentence being served, to be granted the following measure:

- DEFERMENT OF SERVING THE SENTENCE – ARTS. 146 and 147 C.P. (tick the field of interest)**  
 [without limitation of sentence]
  - MANDATORY DEFERMENT FOR PREGNANT WOMEN - Art. 146 N. 1 C.P. (**enclose documentation proving the pregnancy status**)
  - MANDATORY DEFERMENT FOR A MOTHER OF CHILDREN UNDER 1 - Art. 146 N. 2 C.P. (**enclose family status**)
  - MANDATORY DEFERMENT FOR A PERSON WITH A SERIOUS PHYSICAL ILLNESS THAT IS INCOMPATIBLE WITH DETENTION - Art. 146 N. 3 C.P. (**enclose medical documentation**)
  - OPTIONAL DEFERMENT PENDING A PARDON - Art. 147 N. 1 C.P.
  - OPTIONAL DEFERMENT DUE TO SERIOUS PHYSICAL ILLNESS INCOMPATIBLE WITH DETENTION - Art. 147 N. 2 C.P. (**enclose medical documentation**)
  - OPTIONAL DEFERMENT FOR A MOTHER OF CHILDREN UNDER THREE - Art. 147 N. 3 C.P. (**enclose family status**)
  
- HOUSE ARREST INSTEAD OF DEFERMENT – Art. 47 TER, PARA 1 TER O.P. (in the hypothesis above)**  
 [without limitation of sentence]

The undersigned declares for the purposes of the sentence serving deferment application and of sentence deferment in the forms of house arrest:

- 1. That he/she has health conditions that are incompatible with detention because: (**enclose medical certification**)

The undersigned declares for the purposes of the application for house arrest instead of sentence deferment:

2. That he/she has a home (address):

3. That he/she does not have a home but a domicile with (indicate the person/s with whom the sentenced person could be hosted for house arrest)

***(Enclose declaration of willingness to offer accommodation)***

4. That he/she has already submitted the following applications (indicate which ones) to a Supervising Court other than that of Brescia:

5. That, should the application be accepted, he/she will be allowed to leave the home according to the following timescales and procedures:

for personal and/or family reasons:

for therapeutic and/or health reasons, as he/she is currently being treated at:

**The applicant encloses:**

- Declaration of willingness to provide accommodation and to support the prisoner economically, with exact indication of the place where the alternative measure will be carried out
- Family status (also self-certification)
- Medical documentation certifying the incompatibility of physical health conditions

.....  
*(place and date)*

.....  
*(signed)*

.....  
*(place and date)*

.....  
*(signed)*

**The Treating Department / Register Officer encloses:**

- Medical documentation certifying the incompatibility of health conditions
- First observation form
- Juridical position

- Criminal Certification
- Conviction Ruling
- Synthetic Report and / or "extended" behavioural report
- Disciplinary reports (if any)
- Already submitted investigation documents (if any):

**Appointed legal counsel**

YES \_\_\_\_\_

Surname Name Bar of

NO