

IMPORTANT: FAILURE TO COMPLETE FORM MAY DELAY EVICTION LAWSUIT!

PLEASE START EVICTION LAWSUIT:

Owner/Manager Contact, if new client

Name: _____ Address: _____
Email: _____ Phone: _____ Fax: _____

Tenant(s) Name(s) (include DOB and SSN if available): _____

Tenant(s) Address: _____

Please indicate:

Management Company: *yes / no* Name of Management Company: _____
Apartment Complex: *yes / no* Name of Apartment Complex: _____
Limited Access? (i.e. key/code access to building?) *yes / no* (if Yes, then sheriff will need key/code)

Is any Tenant/any Resident in Military or Military Dependent?: *yes / no / unknown*

Do any of the following apply?:

Subtenant: *yes / no* Tenant is Former Owner: *yes / no* Single Family Residence: *yes / no*
Option to Purchase: *yes / no* Foreclosure property: *yes / no* Tenant bankruptcy: *yes / no*

TYPE OF NOTICE: (ATTACH A COPY) () 3 Day Pay Rent or Vacate
() 20 Day Terminate () 10 Day to Comply () 3 Day Nuisance, Waste, Illegal Use/Drugs/Gang/Trespass

NOTICE SERVED ON _____ (DATE) by:

- () Handing a copy personally to the Tenant
- () Handing a copy personally to someone who answered the door and mailing a copy
- () After knocking and receiving no response, posting a copy on the door and mailing a copy

Base monthly rent \$ _____ Rent is due on the _____ day of the month
Late Charge: \$ _____ on the _____ day of the month and \$ _____ per day thereafter
Other Charges: garage/parking \$ _____ utilities \$ _____
Other (identify) \$ _____.

TENANCY IS: () Month to Month () Lease - last day of lease is _____ () Tax Credit
() Section 8 – Market rent is \$ _____ tenant's portion of the rent is \$ _____.

Total rent owing \$ _____ . Please itemize rent owing by month _____
Late Charges of \$ _____ as of _____
Other Charges \$ _____ Fee for Notice (if any) \$ _____ TOTAL DUE \$ _____

DATE: _____ NAME: _____

PLEASE DO NOT HESITATE TO CALL OR EMAIL WITH ANY QUESTIONS!!
THERE IS NO SUCH THING AS A BOTHERSOME OR UNIMPORTANT QUESTION!!