



24 Hour Group

Branch / Centre Name:  
**Head Office**

**HIGH COURT WRIT OF CONTROL**  
**Instruction to transfer up a county court Judgement for High Court Enforcement**

I/We hereby authorise any transfer up (if necessary) and enforcement action under the instruction of 24 Hour Group of Unit 1B, Waterham Business Park, Highstreet Road, Waterham, Kent, ME13 9EJ to enforce any Judgement/order through the High Court under the authority of our authorised High Court Enforcement Officer.

I/We hereby authorise 24 Hour Group to obtain (if applicable) and enforce a High Court Writ of Control, using the authorisation of their associated High Court Enforcement Officer.

Name of Claimant:  
(As it appears on the Judgement)

Claimant Address:

Claimant Contact Number:

Claimant Email Address:

Defendant Name:

Defendant Address:

Defendant Details if different from that on the Judgement/Order:

Defendant Name:

Defendant Address:

Judgement Monetary Award of:

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Date Judgement Awarded:

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I confirm that I have attached a copy of the County Court Judgement/Order to be transferred and/or enforced

Please provide any additional documents you feel necessary.

Additional Defendant Information:

(Eg. Any known assets, vehicles and registration numbers, alternative addresses, places of work and additional contact details i.e. phone/fax/email details. Please use an additional sheet if necessary).

In submitting this instruction you confirm that you have not authorised any other enforcement company or individual to transfer this Judgement/Order to the High Court. You also confirm that you have the right (as a representative or claimant) to request the transfer of this Judgement to the High Court.

By issuing this instruction you indemnify 24 Hour Group against all Actions at Law, as well as against all costs, charges or expenses which you may incur or be liable to pay by reason of 24 Hour Group executing this instruction, and hereby undertake not to hold 24 Hour Group, its' employees or its' subsidiaries accountable. By completing and instructing the 24 Hour Group, you are agreeing to their terms and conditions.

I Confirm My Agreement to the Indemnity Clause Above

As Authorised By:  
(Signature)

Authorised By:

(Authorised persons are representatives or company that has been given express consent by the landlord to act on their behalf in relation to the outstanding rent arrears).

Name:  
Address:  
Telephone Number:  
Email Address:

Dated this                      day of

PLEASE RETURN THIS INSTRUCTION BY EMAIL TO: [INFO@24HOURDEBTCOLLECTORS.COM](mailto:INFO@24HOURDEBTCOLLECTORS.COM)