



## 24 Hour Group

(24 Hour Group is a trading name of 24 Hour Debt Collectors Ltd)

### POSSESSION ORDER INSTRUCTION FORM:

Please complete the questions below with as much information as possible that is true to the best of your knowledge regarding the request for an application to obtain the possession order be put before the court.

**Please Note:** This information is purely for the purposes of drafting any documentation and applications in respect of the possession orders. This information will not be used for any other purposes and will not be passed on to any third party, agent or contractor without your prior written consent.

YOUR NAME:	
ADDRESS:	
CONTACT TELEPHONE NUMBER:	
EMAIL ADDRESS:	

**(Please Note:** This information will not be used your information to send you any spam email or for advertising purposes unless you specifically request to be added to the mailing list of the 24 Hour Group).

ADDRESS OF THE PROPERTY YOU ARE CLAIMING POSSESSION OF:	
CLAIMANT'S (LANDLORD) FULL NAME AND ADDRESS:	

---

IF THEY ARE A COMPANY, PLEASE CONFIRM THE NAME AND JOB TITLE OF PERSON WHO IS ABLE TO AUTHORISE THE POSSESSION CLAIM:

PLEASE CONFIRM THE TYPE OF THE PROPERTY IN QUESTION:

(Commercial/Residential/Shop/Unit etc)

TENANT'S FULL NAME AND CONTACT DETAILS:	
PLEASE PROVIDE THE DATE THAT YOU POSSESSION ORDER REQUESTS THAT THE TENANT LEAVE THE PROPERTY:	
PLEASE PROVIDE THE FULL ADDRESS OF THE PROPERTY IN QUESTION:	

PLEASE PROVIDE ANY INFORMATION TO PRESENT TO THE COURT AS PROOF OF YOUR IMMEDIATE REQUIREMENT FOR THE EVICTION TO BE UNDERTAKEN USING HIGH COURT ENFORCEMENT OFFICERS:

(Including damage to the property, new tenants being unable to move into the property, loss of earnings, mortgage arrears, whether this is the landlord's principle home, whether the tenants are preventing the sale of the property)

PLEASE CONFIRM WHETHER YOU HAVE CONTACTED THE COUNTY COURT BAILIFFS TO REQUEST HOW LONG THEY WOULD TAKE TO UNDERTAKE THE EVICTION?

IF SO PLEASE PROVIDE DETAILS:

I confirm that the information provided above is true to the best of my knowledge. By completing and returning this instruction form, I agree to the terms and conditions of the 24 Hour Group.

**SIGNED:** .....

**NAME:** .....

**DATE:** .....

**On completion of this questionnaire, please return to the 24 Hour Group by email at [info@24hourdebtcollectors.com](mailto:info@24hourdebtcollectors.com). Should you have any queries regarding the questionnaire, please do not hesitate to contact us at [info@24hourdebtcollectors.com](mailto:info@24hourdebtcollectors.com) and one of our specialist advisors will be happy to assist you.**

