

24 Hour Bailiffs Limited Instruction Form

POSSESSION ORDER: PERSONS UNKNOWN/SQUATTERS

| Your Name: |
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| Address: |
| Contact Telephone Number: |
| Email Address: |
| Address of the Property you are claiming possession of: |
| Claimant's/Landlord's Name and Address: |
| If they are a company, please confirm the name and job title of the person who is able to authorise the possession claim: |
| Please provide proof of interest in the Property: (Deeds, Title Registry etc) |
| Please provide the date that you first knew of the squatters at the property: |
| Please confirm what action you have taken since finding the squatters i.e. contacted the police. |

| Please confirm whether any damage has been done to the Property or any losses you have incurred as a result: |
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| Please provide any information to present to the court as proof of your immediate requirement for a possession order to be granted: (Including damage to the property, tenants being unable to use the property, loss of earnings etc) |
| Please confirm whether there are any third parties with access to the Property: |
| Please attach any of the documents stated above to this instruction form as proof of your interest in the Property and any supporting documentation in support of your claim for possession. |
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| Please Note: This information will not be used for any other purposes other than the instructions of the client and will not be passed on to any third party, agent or contractor without your prior written consent. |
| I confirm that the information provided above is true to the best of my knowledge. I confirm that on instructing 24 Hour Bailiffs Limited I am agreeing to their terms and conditions and agreed fees, as provided. |
| SIGNED: |
| NAME: |
| DATED: |

| On completion of this instruction form, please return to 24 Hour Bailiffs Limited by email at info@24hourbailiffs.com Should you have any queries regarding the questionnaire, please do not hesitate to contact us on 01227 750 966 and one of our specialist advisors will be happy to assist you. | | |
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