

DOMESTIC REPOSSESSION / EVICTION INSTRUCTION FORM

Please return form to: High Court Solutions, CWG House, Market Rasen, Lincolnshire LN8 3HA
OR Email to repo@highcourtsolutions.co.uk

*Please make immediate payment directly into the account in order we can undertake your instructions:-
 High Court Solutions, Sort Code: 40-30-26 Account No: 51493183 Ref: "Debtor name/Invoice".*

Large or Communal type Premises may require an initial surveillance investigation for which there is an additional minimum charge of £200.00+VAT (at current rate) which is required to be paid directly into the account above.

Instruction for High Court Solutions to take action		Our Ref:	
Instruction from:			
Contact Name:		Client Reference:	
Company Name:			
Address:			
Postcode:			
Email Address:			
Telephone:			
Claimant (Landlord or Landowner) Details:			
Landlord Name:			
Address:			
Postcode:			
Email:			
Telephone			
Defendant (Tenant or Squatter etc.) Details:			
Tenant Name:			
Address:			
Postcode:			
Email:			
Telephone			
Relating to the following premises or Land:			
Address:			
Postcode:			
Grid Reference if Known:			

CWG House,
 Gallamore Lane,
 Market Rasen,
 Lincs. LN8 3HA
 Tel: 0300 303 3220
 Fax: 0300 303 3221

Please Provide the following information where applicable:	
Are there any details of the debtor on the internet?	<input type="checkbox"/> Yes <input type="checkbox"/> No [Please tick as appropriate]
How many caravans / Vehicles are there ?	
How long have they been there?	
Are there any Children? <i>if yes please enter the number</i>	
Are you aware of anyone undergoing medical treatment based on the site? (NB : this may cause a 5 day delay)	
Has a Gypsy Liaison Officer been in contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No [Please tick as appropriate]
If yes above, What have they said:	
Are there any Police Logs	<input type="checkbox"/> Yes <input type="checkbox"/> No [Please tick as appropriate]
If yes above please ensure we have details:	

NOTES:
Please provide any other information that may assist enforcement (Use separate paper if required)

Please provide name for premises Window notice	
Please provide telephone no. for premises Window notice	
Is there any particular day you wish us to effect repossession ?	
It is preferable that you provide your own locksmith – please provide details	
WHO SHOULD THE NEW KEYS BE GIVEN TO ?	
If necessary we can arrange locksmiths - please state how many locks, and what type will be required ?	

Authorisation and Signature:
By signing this authorisation I/we authorise High Court Solutions and/or their appointed Agent to proceed with the eviction and in doing so I/We agree to be bound by the terms and conditions as published on High Court Solutions website. Furthermore in signing this authority I/we hereby indemnify High Court Solutions and/or their agent against any/all Actions at Law, as well as against all costs, charges or expenses which I/We may incur or be liable to pay by reason of High Court Solutions executing the Writ and hereby undertake not to hold High Court Solutions, their employees or appointed Agents accountable for any costs or goods forcibly or clandestinely removed once the property is secured.
I authorise High Court Solutions to instruct any necessary third parties in this matter.
Print Name: _____ Sign: _____
Date: _____ [Day / Month / Full Year]

NOTE:

PLEASE NOTE THAT IF YOU REQUIRE US TO RE-ATTEND i.e. PROPERTY IS UNFURNISHED AND NEEDS ATTENDANCE FOR TENANT TO REMOVE THEIR ITEMS THERE IS AN ADDITIONAL CHARGE OF £400+VAT, PLUS TRAVEL