

REMOVAL OF SQUATTER 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 payment of OUR INVOICE directly into the account:-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 charge which is required to be paid directly into the account above prior to undertaking.

Instruction for High Court Solutions to take action			Our Ref:						
Instruction from:									
Contact Name:									
Company Name:									
Address:									
Postcode:									
Email Address:									
Telephone:									
Claimant (Landlord or Landowner) Details:									
Landlord Name:									
Address:									
Postcode:									
Email:									
Telephone									
Defendant (Tenant or Squatt	ter etc.) Deta	ils:							
Tenant Name:									
Address:									
Postcode:									
Email:									
Telephone									
Relating to the following Premises or Land:									
Address:									
Postcode:									
Opening Hours:	From:			To:					
Trading:	Yes:			No:					
Type of premises:		Warehouse	Office		Food Outlet				
		Retail	Other:						
Grid Reference if Known:									

Tel: 0300 303 3220 Fax: 0300 303 3221

Please Provide the following information where applicable:								
Are there any details of the debtor on the interne	et?		Yes		No	[Please tick as appropriate]		
How many caravans / Vehicles are there?								
How long have they been there?								
Are there any Children? if yes please enter the number								
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?			Yes		No	[Please tick as appropriate]		
If yes above, What have they said:		•						
Are there any Police Logs			Yes		No	[Please tick as appropriate]		
If yes above please ensure we have details:								
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		,						
It is preferable that you provide your own locksn provide details								
WHO SHOULD THE NEW KEYS BE GIVEN TO ?								
If absolutely necessary we can arrange locksmi locks, and what type will be required?	any							
Authorisation and Signature:								
I/We instruct and authorise High Court Solutions necessary notices of determination as required.		eir in	struct	ed age	nt to c	hange the locks, display any		
I/We authorise High Court Solutions and/or their agent to affect Repossession.								
By signing this authorisation you hereby agree to website. Furthermore in signing this authority you haw, as well as against all costs, charges or expexecuting the Warrant and hereby undertake not Agents accountable for any costs or goods forci secure. Once you have signed the authority and a data	ou hereby benses who ot to hold H bly or clan	inde nich y High (ndest	mnify ou ma Court nely r	us/or o ay incui Solutio emove	our age or be ns, the d follow	nt against any/all Actions at liable to pay by reason of your ir employees or appointed wing the premises being made		
fees are non-refundable.	<u> </u>			-				
Print Name: Signed:								
Date: (Day/Mont				ar)				

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