

TENANT INFORMATION SHEET (This form is not to be modified in any manner)

****ALL FIELDS MUST BE COMPLETED****

YOUR EVICTION IS NOT SCHEDULED UNTIL THE CIVIL UNIT HAS REVIEWED AND APPROVED THE INFORMATION PROVIDED ON THIS TENANT SHEET

Attorney or Landlord name & phone number:

Mailing/Billing address:

Name and phone number of who will be meeting the deputies for the physical eviction:

Cell Phone (required):

TENANT INFORMATION:
Tenant names & **dates of birth:**

(Include children and their ages, if known)

Address: _____

Length of time in residence: _____

Pets/Weapons: _____

RESIDENCE INFORMATION:

Type of structure: _____

Outbuildings: _____

If a **mobile** home, who owns the **mobile:**

EVICTION INFORMATION:

Reason for the eviction: _____

Based on a foreclosure?: (circle one) YES NO

Do the tenants have any disabilities that will require accommodations (**Required field** - include any assistance or case-worker names & phone number)

What problems have there been:

Do not write in this box - Sheriff use only

Intake:

4 Writs: _____ 1 Property Storage letter: _____

EVICTON DATE/TIME: _____

WRIT EXPIRES: _____

Reissue received _____

Electronic calendar entry (initial) _____

SERVE BY DATE: _____

OUT BY DATE: _____

Indemnity bond in: _____ **Not req.:** _____

Bond/writ approval initial & date: _____

2nd approval initial & date: _____

Status check / Writ Canceled prior to Eviction:

Status or Canceled By/Date & time/reason:

Eviction Info:

Deputy: _____

___ Vacant ___ Lks Chgd ___ Posted

___ Ten. Absent ___ Ten. There ___ Ten. Jail

Property:

___ Stored ___ Street ___ Continue to Move

Time: _____

Remarks: _____