



Kent Bailiff Services
 March Studio, Peills Yard,
 Bromley
 Kent,
 BR1 9NS
Tel: 08000370360
E-mail: info@kentbailiffs.co.uk
Visit: www.kentbailiffs.co.uk

INSTRUCTION TO TRANSFER UP AND ENFORCE A COUNTY COURT ORDER OF POSSESSION BY WRIT OF POSSESSION

INSTRUCTION FORM

REF: _____

Company Name: _____

Contact Name: _____

Address: _____

Postcode: _____

Email: _____

Telephone: _____ Mobile: _____

Your Ref: _____

AUTHORISATION

I hereby consent to Kent Bailiff Services their agents and lawyers to obtain a writ of possession in doing so to complete and sign all relevant forms and statements of truth on my behalf. I will provide copy of all relevant orders and judgements.

Court Claim Number: _____

DETAILS OF THE LANDLORD OR AGENT WHO WILL BE PRESENT ONSITE:

Contact Name: _____

Contact Company: _____

Telephone: _____ Email: _____

Please indicate your preferred day and time for the eviction to take place:

MON TUE WED THUR FRI SAT SUN MORNING AFTERNOON EVENING

ADDITIONAL INFORMATION

Location of trespassers/ occupiers: Land Residential Commercial

Status of trespassers/ occupiers: Squatters Protesters Tenants Trespassers Mortgagees

How many trespassers/ occupants are present? (over 16 years and over): _____



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If on land, how many vehicles/caravans are present: _____

How many of the following are on site: Entrances: _____ Floors: _____ Rooms: _____ Animals: _____

Method of entry/locksmiths will be arranged (unless otherwise specified). If applicable, please provide details of any electronic doors/gates or shutters:

Are there any children (under the age of 16) animals or hazardous materials at the address (if yes please provide further details):

Does the defendant have any previous convictions: YES NO

Has the defendant ever used any form of violence or threatening behaviour: YES NO

Police Log/Incident Number: _____

Please provide any further information that may be relevant or useful:

Have any provisions been made to secure and/or sanitise the property or land upon vacant possession to avoid repeat costs/hazards, if yes please provide details:

*By submitting this authorisation, you hereby agree to the terms and conditions as laid out on our website.
 Terms and conditions are available to view at www.kentbailiffs.co.uk/terms-and-conditions.*

Signed: _____ Date: / / (day/month/year)