## LANDLORD/TENANT - INSTRUCTIONS TO SHERIFF

Court Case No: \_\_\_\_\_\_

## PARTY TO BE SERVED

(USE SEPARATE FORM FOR EACH TENANT)

Name (and NICKNAMES) of party to	be served	<u> </u>					
DESCRIPTION Date of Birth:		Age:	Sex:	Height:	Weight:		
Scars, Marks or Tattoos:							
Vehicle(s) driven by party (SPECIF			ATE), if known:				
RISK ANALYSIS Please a safety. (WEAPONS, DOGS, PAST \		•	•		is only used for officer – PLEASE SPECIFY):		
	***************************************						
	PA	RTY REQUESTING	SERVICE				
I, (PRINT NAME)		, the pa	rty requesting	service in this ca	se, hereby request the		
Sheriff of Multnomah County to se	erve the follo	wing:					
Please serve the enclosed (CHECK ONE)		<ul> <li>☐ Residential Eviction Summons &amp; Complaint</li> <li>☐ Notice of Restitution</li> </ul>					
		□ Writ of Execution on Judgment of Restitution					
Your Contact Information: (THIS IN	FO WILL NOT	BE SHARED WITH THE O	THER PARTY- FO	R MCSO USE ONLY	)		
Name:							
Mailing Address:							
	Alt Phone #:						
SIGNATURE OF PERSON REQI	JESTING SE	ERVICE			•		
Signature:				Date:			

Type of Service (Personal, Substitute, Office etc.) is made according to ORS & ORCP requirements. Information provided will not override any existing rules of civil process. Please note that failure to complete this information could delay the service or execution of your process, or could result in returning your paperwork if it is unclear to the sheriff precisely who you want served, etc. Personal injury to a deputy sheriff could also result by omitting any information. This information will be used solely for the execution of process and for officer safety purposes. Information provided could be subject to disclosure under ORS Chapter 192. Your assistance is greatly appreciated.

Deputies – Do not serve this form.

Please return to CIVIL OFFICE after service is complete.

## REQUIRED EVICTION INFORMATION – AGENT INFO & OFFICER SAFETY

NAME: NAME: NAME: NAME: NAME: NAME: NAME: NAME: NAME: Reason for Eviction:  REQUIRED: THE SHERIFF'S OFFICE WILL CREATE A TRESPASS NOTICE CONTACT NUMBER FOR THE TENANT(S) TO CALL TO RE MUST BE PROVIDED. PLEASE PROVIDE A CONTACT NUM TRESPASS NOTICE HERE:  AGENT(s) ON-SITE APPOINTED TO RECEIVE POSSESSION OF	DOB/Age: DOB/Age: DOB/Age: DOB/Age: DOB/Age: DOB/Age: DOB/Age: DOB/Age: MOB/Age: MOB
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RESPASS NOTICE HERE:	
RESPASS NOTICE HERE:	
OCKOUT. The names below MUST match the names listed of Judgment of Restitution form.	
NAME(s):	
Lontact Numbers	
NAME(s):	
contact Numbers	
NAME(s):	
Contact Numbers	
NAME(s):Contact Numbers	
Contact Numbers	
JNDER <u>NO</u> CIRCUMSTANCES SHOULD A TENAN	IT BE GIVEN THE DATE AND TIME
OF AN EVICTION PRIOR TO THE LOCK OUT. THIS	S IS FOR OFFICER SAFETY.
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HERIFF'S OFFICE USE ONLY	

STATE OF OREGON County of Multnomah	) ) ss. )	Instruction to Sheriff re: Execution of Judgment of Restitution  Case No
To the Sheriff of Multnomah Co	ounty, Oregon:	•
I am the landlord/plaintiff in this	s case, or attorne	ey, therefore:
	upon the tenant/	se. A notice of restitution was served in accordance with defendant(s) in this case and the four day period
		panying writ of execution of judgment of restitution in the co employ whatever lawful means you determine are best
that person(s) holding the proper circumstances which could result Multnomah County, its agents, a	rty may resist re It in damage bein and officers; ham	unty Sheriff's Office must gain entry to the premises and moval or have constructed barriers, and that there are ng caused to my property. I agree to indemnify and hold mless from any claims arising as a result of damages to nd removal of the tenant/defendant(s) and/or other
		ntiff, will be on site during the eviction, and understand premises. (Agent must be an individual, not a business.)
Agent(s):		
Dated:		Signed: Landlord/Plaintiff or Attorney
This agent may be required to significant	gn a criminal co	gents to insure one of the listed agents is in attendance. mplaint if a trespass arrested is warranted. must be present at the eviction.