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2nd STEP - NOTICE OF RESTITUTION

****Please Print Form Legibly****

Clear Form

Today's Date:	Filing County:
Contact Phone #:	Email:
Supervisors Name:	Supervisors Email:
Property Mgmt Co.	Purchase Order Number:
Special Access Needed?: (ie: FOB/CODE) (Failure to provide access information may result in your eviction not being able to be served & additional fees may apply) NO: ☐ YES: ☐	
Access Instructions:	

Reset Defendant Details

DID THE TENANT(S) APPEAR?

YES ☐ NO ☐

IF YES: INCLUDE A COPY OF THE SIGNED AGREEMENT & SEE BELOW
IF NO: DO NOT ATTACH ANY ADDITIONAL DOCUMENTS TO THIS FORM

Hearing Date: _____

Case Number: _____

Requestors Full Name: _____

(Required - Please type or print legibly)

****IF THE TENANTS APPEARED AND DID NOT FOLLOW THROUGH WITH THE AGREEMENT, PLEASE STATE EXACTLY WHAT TERMS OF THE AGREEMENT THEY HAVE NOT FOLLOWED THROUGH WITH.****

Failure to attach signed agreement OR to specifically state what terms the tenant(s) have missed may result in an additional \$10.00 convenience fee.

Additional Notes or Instructions:

*Action Services will not provide legal advice or services, engage in the practice of law, assess the validity of termination notices or the possibility of defenses / counterclaims when assisting clients. You also agree to hold harmless Action Services, it's owners, corporate officers, employees, agents and representatives when acting at your request and you further state you have the complete authority to make such request. Any account that is past due may be charged a late fee of \$25.00 per file when account is over 60 days and at the discretion of Action Services. Action Services will charge a \$40.00 prep fee for any request that is canceled prior to being filed with the courts. By printing your name below, you authorize us to fulfill your request and agree to the terms herein.

Requestors Name