

**OTHER SERVICE  
REQUESTS**

- Dismissal
- Writ of Restitution
- Satisfaction

**HULL, HOLLIDAY & HOLLIDAY, PLC.**

**WORK SHEET FOR FORCIBLE DETAINER**

PLEASE PROVIDE THE FOLLOWING DOCUMENTS:  
**SIGNED LEASE, PAYMENT LEDGER, NOTICE (S),  
RENTAL CONCESSION ADDENDUM,  
CERTIFIED RECEIPT (IF APPLICABLE)**

P: 602-230-0088  
F: 602-230-7421  
E: evictions@doctorevictor.com

FOR ATTY OFFICE USE ONLY

PB \_\_\_\_\_

RC \_\_\_\_\_

NTC \_\_\_\_\_

UT \_\_\_\_\_

NSF \_\_\_\_\_

OTHER \_\_\_\_\_

Date: \_\_\_\_\_ Account #: \_\_\_\_\_ PO#: \_\_\_\_\_

1. NAME OF COMPLEX OR MANAGEMENT/REALTY COMPANY:

\_\_\_\_\_

2. **LEGAL ENTITY REQUIRED:** THIS WOULD BE EITHER THE **OWNER'S NAME**  
OR THE **NAME OF THE LLC. OR CORPORATION.**

\_\_\_\_\_

3. TYPE OF SERVICE REQUESTED, CHECK APPROPRIATE BOXES:

- NONPAYMENT (TENANT FAILED TO PAY RENT OR PAST DUE RENT)
- NON-COMPLIANCE (TENANT VIOLATED LEASE PROVISIONS OR RULES OF COMPLEX)
- HOLD-OVER (TENANT FAILED TO MOVE OUT AFTER NON-RENEWAL NOTIFICATION)
- IMMEDIATE (GUNS, DRUGS, VIOLENCE, GANGS, PROSTITUTION, ETC.)

4. NAME OF ADULT TENANT(S) - ONLY LIST TENANTS WHO SIGNED LEASE: \_\_\_\_\_

\_\_\_\_\_

5. APARTMENT NUMBER AND/OR ADDRESS: \_\_\_\_\_

6. MONTHLY RENT W/TAX: \_\_\_\_\_ 7. RENTAL DUE DATE: \_\_\_\_\_

8. UNPAID FROM (MONTH/YEAR): \_\_\_\_\_ 9. PRIOR BALANCE: \_\_\_\_\_

10. UTILITIES: \$ \_\_\_\_\_ IF NOT INCLUDED IN RENTAL VALUE  
11. NOTICE FEE: \$ \_\_\_\_\_ IF ALLOWED BY LEASE

12. CONCESSION/MOVE IN SPECIAL (PROVIDE SPECIAL PROVISIONS PAGE OF LEASE): \$ \_\_\_\_\_

13. INITIAL LATE CHARGE: \$ \_\_\_\_\_ PLUS \$ \_\_\_\_\_ PER DAY AFTER THE \_\_\_\_\_

14. DATE OF SERVICE: \_\_\_\_\_ 15. METHOD OF SERVICE: \_\_\_\_\_

**IF POSTED, YOU MUST ALSO CERTIFY MAIL**

16. DOES SECTION 8 OR OTHER SUBSIDIZED RENT APPLY TO THIS TENANT? \_\_\_\_\_ IF YES, HAVE YOU COMPLIED WITH  
THE LAWS, REGULATIONS AND REQUIREMENTS GOVERNING THIS TENANCY? \_\_\_\_\_

Y/N PLEASE INITIAL

17. PLEASE SIGN THE FOLLOWING STATEMENT: The above information is true and correct to the best of my knowledge  
and Landlord/Agent hereby states that the Landlord/Agent has not accepted a partial payment in the current rental period, or  
has a signed, written partial payment agreement (attached).

\_\_\_\_\_  
LANDLORD OR LANDLORD'S AGENTS SIGNATURE

\_\_\_\_\_  
PHONE NUMBER