



www.localevictions.net · (404) 375-7819 (phone) · info@localevictions.net (e-mail)

## EVICTON REQUEST FORM

Please print clearly using CAPITAL LETTERS and fax completed form to (866) 213-4588

### Owner Information

Owner Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Complete Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
E-mail: \_\_\_\_\_

### Tenants to be Evicted (complete names as they appear on rental agreement)

1. \_\_\_\_\_ 4. \_\_\_\_\_  
2. \_\_\_\_\_ 5. \_\_\_\_\_  
3. \_\_\_\_\_ 6. \_\_\_\_\_

Are there unknown tenants? YES or NO (circle)

Subject Premises: \_\_\_\_\_  
Street Address Apt/Unit No City State County

Date Rental Agreement Signed: \_\_\_\_\_ Written or Oral (circle)

Reason for Eviction: [ ] Tenant fails to pay rent which is now past due.  
(check one) [ ] Tenant holds the premises over and beyond the term for which they were rented or leased to him.  
[ ] Other grounds: \_\_\_\_\_

Date Rent is Due? \_\_\_\_\_ Month to Month? YES or OTHER \_\_\_\_\_  
Amount Past Due? \_\_\_\_\_ Due from: \_\_\_\_\_ to: \_\_\_\_\_

**Fax a copy of the rental agreement and any notices you have served (i.e. 3-day notice) along with this form.**

The tenants have failed to comply with the notice. I request that you initiate action for eviction for the above stated tenants at the above indicated premises.

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date