

EVICTION INTERVIEW FORM

Client Information:

Client's Name: _____

Client's Address: _____

County: _____

Client's phone: Home: _____ Time to call: _____

Employer's Name: _____

Office: _____ ext. _____

Fax: _____ hours: _____

Client's SS#: _____ Client's DOB: _____

INTERVIEW QUESTIONS:

Defendant/Tenant Information

1. Name: _____

2. Address: _____ Apt. # _____

3. Employer: _____

4. Employer's Address: _____

Property Information

5. Owner of property: _____

6. Address of owner: *(If different than Plaintiff's)* _____

7. Address of Property: *(If different than Plaintiff's)* _____

8. Legal description of property: _____

9. Type of lease: ____ Oral ____ Written *(obtain copy)*

10. Rent agreements: \$ _____ per _____. Date due: _____

11. Security deposit: @ _____ Held by: _____

12. Attorney's fees recoverable: ____ Yes ____ NO

Eviction Information

13. Reason:

____ Rent arrearage: Amount \$ _____ Time period: _____

____ Lease violation: _____

____ Other: _____

Notice Information

14. Has Notice been served: ____ Yes (*obtain copy*) ____ No

15. Type of Notice: ____ 30 Day ____ 10 Day ____ 5 Day

____ Demand for immediate possession

____ Other: _____

16. Process to be served at following address:

Miscellaneous

ATTORNEY INFORMATION

Attorney Completing Form: _____

Opposing Attorney: _____

Address: _____

Phone: _____ Fax: _____