



# Sheriff's Mandatory Eviction Data Form

An incomplete data form may prevent or delay scheduling your eviction.  
 Writs cannot be served without 24 hour property access.  
 Key/card/access code must be provided to secured access properties.  
 Form must be completed by the on-site property manager.

King County Superior Court case number:

Check all that apply:

Commercial     
  Residential     
  Sublet     
  Post Foreclosure     
  Mobile Home

24 hour Contact person or Landlord (person with whom the detective will coordinate the eviction):

Name: Cell (mandatory):

Direct Office phone: Ext.:

E-mail (mandatory):

Eviction property address (include complex or business name as it appears on property & zip code):

Is this a secured building?    Yes    No    **If yes, key or entry code required:**

Is there on-site management?    Yes    No    **Management office hours:**

## Tenant Information

Please list the full names and dates of birth for the tenants and others known to be residing at this property.

Full name (First, Middle, Last):	Date of birth, driver's license # or state ID#:	Contact phone number(s) for tenant:

Emergency contact information for tenant (name & phone number):

Number of children and approximate ages:

## Hazard Information

To the best of your knowledge, answer the following:

Have police ever responded to the property?	Yes	No
Do tenants have suspected mental health issues?	Yes	No
Suspected drug activity?	Yes	No
Threats or acts of violence?	Yes	No
Suspected weapon(s) at property?	Yes	No



**KING COUNTY SHERIFF'S OFFICE RESTORATION OF POSSESSION VERIFICATION**

PURSUANT TO A WRIT OF RESTITUTION SERVED BY THE KING COUNTY SHERIFF'S OFFICE, AT THE PREMISES LOCATED AT THE ABOVE ADDRESS, IN KING COUNTY, WASHINGTON ON

I, (PRINT NAME LEGIBLY) \_\_\_\_\_ THE ACTING OWNER/AGENT, HEREBY ACKNOWLEDGE THE ABOVE-DESCRIBED PREMISES ARE RESTORED TO MY POSSESSION AND CONTROL BY THE KING COUNTY SHERIFF'S OFFICE ON THE DATE AND TIME INDICATED BELOW.

WRIT COMPLETION DATE:

TIME

SIGNATURE OWNER/AGENT

WITNESS / DEPUTY

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