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"Fast Eviction Service"

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FAX COVER SHEET

ATTENTION: COLLECTION DEPARTMENT

REQUEST FOR NEW COLLECTION

DATE: _____

FROM: _____
(sender's name, address, telephone number)

PHONE # _____ **FAX#** _____

RE: _____ **V.** _____
Owner/Apt. Complex Name **Tenant(s) / Occupant(s)**

CASE # _____

Enclosed please find the following:

- _____ **Signed Collection Agreement**
- _____ **Copy of Rental Application**
- _____ **Copy of Cancelled Rent Check**
- _____ **Disposition of Security Deposit**
- _____ **Other (copy of drivers license, social security card, copy of pay stub)**