



PIERCE COUNTY SHERIFF'S DEPARTMENT
CIVIL UNIT
930 TACOMA AVE S, FL 1
TACOMA WA 98402
(253) 798-7520

MANDATORY EVICTION DATA FORM

Cause # _____

Check all that apply:

Commercial Residential Sublet Post Foreclosure Mobile Home

Name of Apartment Complex: _____

Landlord's name:	
Address:	
Phone nos. :	

List contact person if other than Landlord.. Please list the person the Eviction Deputy will be coordinating the eviction with.

Contact person's name/address: _____

24 hour phone numbers: _____

Eviction property address w/zip code: _____

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 #	Tenant's Contact Ph. No.

Number of children and approx. ages: _____

Reason(s) for the eviction: _____

Are there any detached storage units or garages? ☐ YES ☐ NO

List types of pets known to be living at the residence: _____

Do the tenants have any disabilities/mental health conditions that will require special accommodations? ☐ YES ☐ NO

- If yes, please include other agencies to be contacted and caseworker's name and ph.no.:

HAZARD INFORMATION

To your best knowledge: Do the tenants pose a threat to deputies? (Drug activity, criminal activity, known to be armed, mentally disturbed, history of assaults or threats etc). ☐ YES ☐ NO

- If yes, please describe (use back if necessary):
