



# Compulsory purchase order Instruction form

\*Required fields

To request our services simply complete this form and submit it by the email button, print and post, or scan and email it to:

**The Sheriffs Office,**

141 Walter Road, Swansea, SA1 5RW

**DX:** 52966 Swansea

**E:** client@thesheriffsoffice.com

**T:** 01792 450033

**F:** 0333 003 5120

## CONTACT DETAILS

Are you an existing client?\*

Yes No

Are you the solicitor/barrister or acquiring authority?\*

Solicitor/barrister Acquiring authority

Is the instructing party VAT registered?\*

Yes No

Title\* First name\*

Surname\*

Organisation name\*

Company registration number (if applicable)

Address\*

Town / city\*

County\*

Postcode\*

Telephone\*

Email address\*

DX (if applicable)

## DETAILS OF LANDOWNER/AGENT/ PRESENT ONSITE

Contact name\*

Contact company (if applicable)

Mobile telephone\*

Email address\*

Please indicate your preferred day & time for the possession to take place (if any)

Mon	Tue	Wed	Thur	Fri
Morning	Afternoon	Evening		

## ADDITIONAL INFORMATION

Location of trespassers/occupiers

Land	Residential	Commercial
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Status of trespassers/occupiers

Squatters	Protestors	Trespassers
Tenants	Mortgagors	

How many trespassers/occupants are present (16 years and over)?

Are there any children (under the age of 16) animals or hazardous materials at the address?

Children	Animals	Hazardous materials
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If yes, please provide further details

If on land, how many vehicles/caravans are present?



### ADDITIONAL INFORMATION CONT

How many of the following are there?

Floors	Rooms	Entrances
Animals	Buildings	

Method of entry team/locksmiths will be arranged (unless otherwise specified). If applicable, please provide details of any electronic doors/gates or shutters

Are there any aggravating factors or background information that needs to be taken into consideration before enforcement?

Yes No

If yes, please provide details

Have any provisions been made to secure and/or sanitise the property or land upon vacant possession to avoid repeat cost/hazards?

Yes No

If yes, please provide details

If no provisions made, would you like us to contact you to discuss options?

Yes No

### AUTHORISATION

I authorise The Sheriffs Office to enforce a Compulsory Purchase Order. I/we have provided the following

I confirm that we are (or have the authority to act on behalf of) a Statutory Authority

I confirm that a Notice to Treat or a General Vesting Declaration has been served/made

I confirm that a Notice of Entry has been served (where necessary)

**Date of service**

I confirm that we have enclosed the original sealed Order

I have read the terms and conditions, available at [thesheriffsoffice.com/terms](https://thesheriffsoffice.com/terms)

I agree to the terms and conditions and confirm that to the best of my knowledge the contents of the form are true.

Please send me your newsletter, details of eBooks, webinars and events. I acknowledge that I can unsubscribe at any point by clicking on the "unsubscribe" link in the email. Please read our [privacy policy](#).

**Signature\***

**Date\***