

Send by email to: CEA@ccebailiff.ca

Head Office – 300 801 Manning Road NE, Calgary, AB T2E 7M8 Website: www.ccebailiff.ca Calgary Ph: 403-262-8800Fx: 403-262-8801Edmonton Ph: 780 448-5833Fx: 780 448-0698

Date:	Client Information
Debtor Information	Name:
Debtor Name(s):	Contact:
	Phone:
	 Tax Roll #:
Debtor Address:	
Phone:	
Best time to seize:	
Hours of Operation (commercial):	RUSH (Additional fees apply)
Total Tax Arrears \$	

Seizure Instructions

OR

We hereby confirm we have the right to seize the property of the Debtor as identified above, pursuant to outstanding taxes owed to us and therefore instruct Consolidated Civil Enforcement Inc. to:

- □ Seize sufficient non-exempt assets of the Debtor to satisfy the total amount owing.
- □ Seize the property listed below:

□ Leave goods in the possession of the Debtor on a Bailee's Undertaking **OR**

Q Remove goods to auction or to a commercial storage facility as listed below:

Any known dangers, threats, or concerns for the bailiff? \Box Yes \Box No. If yes, please elaborate below:

Additional Instructions:



Contract and Indemnity

Contract for Services

The undersigned Instructing Party hereby warrants to Consolidated Civil Enforcement Inc. (Consolidated) that it is the enforcing party, or that it is the lawful agent of the enforcing party or is otherwise legally authorized to give instructions on behalf of the enforcing party to Consolidated and that it has determined that the enforcement activities instructed herein are lawful. Upon instructing Consolidated, the Instructing Party shall be responsible for the costs of such services, including all costs required to lawfully complete, suspend or withdraw civil enforcement activities. The Instructing Party agrees to pay for all services performed and invoiced by Consolidated within 30 days of the invoice date. Such services will be charged at the rate published by Consolidated with the Sheriff for the Province of Alberta. The Instructing Party shall pay interest on overdue amounts at a rate of 18% per annum, calculated annually, not in advance. The Instructing Party further agrees to provide deposits or other advances for civil enforcement services to be performed upon the request of Consolidated.

Instructing Party (Individual or Legal Name of Company): _____

Address:			
Phone:	Fax:	Email:	
Signature <mark>(Required)</mark>		Name (please print)	

Indemnity

The undersigned confirms that enforcement instructions given to Consolidated are lawful and factually accurate and hereby indemnifies on a solicitor and his own client basis Consolidated, and its directors, shareholders, employees, and agents in respect of its fees, charges and disbursements and in respect of any suit, liability, or claim for damages that might be incurred by it in respect of any function carried out on the enforcement instructions. However, this indemnity shall not extend to any liability arising from the negligence or willful misconduct of Consolidated. This indemnity shall remain in force with respect to all services requested from time to time. In the event of litigation to which this indemnity applies, the undersigned agrees to fund, during the course of such litigation, the legal defense costs of Consolidated and its directors, shareholders, employees, and agents. The undersigned further agrees to provide additional indemnities, bonds or assurances as required by Consolidated from time to time.

Individual or Legal Name of Company: _____

Address, Phone and Fax (if different from above): ______

Signature (Required)

Name (please print)

Previous P.P.R. Registration Number (W.C.B. only)

Civil Enforcement Agency File Number

Warrant

(DISTRESS)

Municipal Government Act

Туре

MGA Code

plus costs.

TO:

owing to

CONSOLIDATED civil enforcement

Head Office: 300, 801 Manning Road NE, Calgary AB T2E 7M8 Phone: 403 262-8800 or TF 1 800 313-4270 (press 3) | Fax: 403 262-8801 Email: CEA@ccebailiff.ca

You are hereby instructed to seize the personal property of

in order to satisfy an outstanding debt in the amount of

Location of personal property if different from the debtor's address

Name and Address of Debtor

Name of Creditor

Dated at ______, ____, on _____.

Signature of Instructing Creditor or Authorized Agent

City

Print Name of Instructing Creditor or Authorized Agent

Address of Instructing Creditor or Authorized Agent

Postal Code

Telephone Number

Fax Number

Province



MasterCard/Visa Authorization Form

Today's Date		
Card Type:	VISA MasterCard	
Retainer Amount:		
Cardholder Name:		
Card Number:		
Expiry Date:		
Additional charges incurred	By signing below I hereby authorize Consolidated Civil Enforcement Inc. to charge the above noted credit card for invoices incurred on this file. I agree to pay these charges and understand that Consolidated Civil Enforcement Inc. will forward me copies of the same marked as paid by credit card.	
Card Holder Signature:		

ATTACH PHOTOCOPY OF FRONT AND BACK OF CREDIT CARD

For CCE Office Use Only				
CCE File Number:		Authorization Date:		
Authorization Number:		Authorizing RM:		
CCE Invoice Payment				
Invoice #:	Invoice Amount:	Authorization Date:		
Invoice #:	Invoice Amount:	Authorization Date:		
Consolidated Civil Enforcement Inc. 300 801 Manning Road N.E. Calgary, AB T2E 7M8 * Phone: (403) 262-8800 * Fax: (403) 262-8801 Toll Free Phone: (800) 313-4270 * Toll Free Fax: (888) 262-8803				