

## **Residential Tenancies Service of Notice**

| □ Edmonton – 4482 97 Street Edmonton, AB T6E 5R9 □ Calgary – 300, 801 Manning Road NE, Calgary, AB T2E 7M8 □ Email: calgary@ccebailiff.ca or edmonton@ccebailiff.ca                                                                                                                                                                                                                                                                                                                                                                                                                          | Phone: 780 448-5833 Fax: 780 448-0698  Phone: 403 262-8800 Fax: 403 262-8801  Website: www.ccebailiff.ca                                                                                                                                                                                                                                                                                                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Occupant Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Client Information                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Tenant Name(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Client Reference (if applicable):                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Client Name:                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Client Phone #:                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Rental Premises Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Attachments                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ☐ Lease agreement                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ☐ Ledger                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ☐ Witness Statements / Complaints                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Children: YES / NO Pets: YES / NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ☐ Inspection Reports and Photos of any Damage                                                                                                                                                                                                                                                                                                                                                                                                            |
| Access for Process Server                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ☐ Incident Reports                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Main Door Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Lockbox Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| ☐ Key to Main Door Provided? Yes/No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| ☐ Contact for Access                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Notice Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <ul> <li>□ 14 Day Redemption Notice (Only Non-Payment of Rent Substantial Breach</li> <li>□ 14 Day Non-Redemption Notice (Multiple Substantial Breach</li> <li>□ Warning Notice</li> <li>□ Final Warning Notice</li> <li>□ Non-Renewal Notice</li> <li>□ Demand Notice</li> </ul>                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Indemnity                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| The undersigned confirms that enforcement instructions given to C indemnifies on a solicitor and his own client basis Consolidated, ar its fees, charges and disbursements and in respect of any suit, liable any function carried out on the enforcement instructions. However, negligence or willful misconduct of Consolidated. This indemnity should to time. In the event of litigation to which this indemnity applies, the the legal defense costs of Consolidated and its directors, sharehold provide additional indemnities, bonds or assurances as required by Instructing Party: | nd its directors, shareholders, employees, and agents in respect of bility, or claim for damages that might be incurred by it in respect of this indemnity shall not extend to any liability arising from the nall remain in force with respect to all services requested from time a undersigned agrees to fund, during the course of such litigation, ders, employees, and agents. The undersigned further agrees to y Consolidated from time to time. |
| Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Phone: Fax:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Signature (Required) Name (please print)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |



## MasterCard/Visa Authorization Form

| Today's Date                                      |                                                                                                                                                                                                                                                                                                          |
|---------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Card Type:                                        | ☐ VISA ☐ MasterCard                                                                                                                                                                                                                                                                                      |
| Retainer<br>Amount:                               |                                                                                                                                                                                                                                                                                                          |
| Cardholder<br>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<br>Signature:                         |                                                                                                                                                                                                                                                                                                          |
| ATTACH PHOTOCOPY OF FRONT AND BACK OF CREDIT CARD |                                                                                                                                                                                                                                                                                                          |
| For CCE Office Use Only                           |                                                                                                                                                                                                                                                                                                          |
| CCE File Number:                                  | Authorization Date:                                                                                                                                                                                                                                                                                      |
| Authorization Numb                                | per: Authorizing RM:                                                                                                                                                                                                                                                                                     |
| CCE Invoice Payment                               |                                                                                                                                                                                                                                                                                                          |
| Invoice #:                                        | Invoice Amount: Authorization Date:                                                                                                                                                                                                                                                                      |
| Invoice #:                                        | Invoice Amount: Authorization Date:                                                                                                                                                                                                                                                                      |