

# LOEFFLER LAW GROUP PLLC

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## POST-FORECLOSURE EVICTION COVER SHEET

**SAVE AND SEND US THIS FORM FROM YOUR E-MAIL ACCOUNT OR PRINT AND FAX TO: 206.443.4545.**

To: Loeffler Law Group PLLC

**Please initiate legal proceedings against the following named tenant or tenants:**

Name of occupant(s): \_\_\_\_\_

Address of the subject premises is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone number of occupant: \_\_\_\_\_

Birthday of occupant(s): \_\_\_\_\_

Social Security number (if known): \_\_\_\_\_

**Is the occupant in the military?** Yes  No

It will make processing of the case faster by providing this data.

**Legal owner of the subject premises is:** \_\_\_\_\_

**Is the property a security building?** Yes  No  Security code: \_\_\_\_\_

**Contact regarding this matter is:** \_\_\_\_\_

Billing address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Preferred contact method:**  
Phone:   
Fax:   
E-mail:

**The following documents are attached or enclosed for your review:**

- Trustee's deed  Notice to vacate  
 Notice of trustee's sale  Correspondence from tenant (# of pages): \_\_\_\_\_

**Additional information or instructions:**

**If a new client, please tell us how you heard about us? (Thank you.)**

AVVO  Google Ad  Referral  Article  Presentation/CLE  RHA/RHJ  Video

Referral from: \_\_\_\_\_ Other: \_\_\_\_\_

I authorize the Loeffler Law Group PLLC to commence legal proceedings against this tenant. I certify that I am authorized by the owner of the rental property to enter into a business relationship with the Loeffler Law Group PLLC on behalf of the owner.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
(print name) \_\_\_\_\_

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