



# Writ of Possession – Real Property (Eviction)

## Instructions to the Sheriff of Mendocino County

NORMAL HOURS FOR SERVICE ARE MONDAY – FRIDAY, 8:00 A.M. TO 5:00 P.M.

Matthew C. Kendall, Sheriff-Coroner

THIS INSTRUCTION FORM IS **REQUIRED** FOR ALL EVICTION REQUESTS.  
NO OTHER LETTER OF INSTRUCTION WILL BE ACCEPTED.

The Sheriff must have written, signed instructions by the Plaintiff representing him/herself or the Attorney of Record in accordance with California Civil Procedure Code 262.

(Please type or print legibly)

Court Case # \_\_\_\_\_ Sheriff's File # \_\_\_\_\_

Plaintiff/Petitioner

Defendant/Respondent

Does the Writ specify "No Lockout Prior To:"? [ ] NO [ ] YES Date: \_\_\_\_\_

Was the property subject to a foreclosure? [ ] NO [ ] YES

Was the property subject to a bankruptcy proceeding? [ ] NO [ ] YES Bankruptcy File #: \_\_\_\_\_

Was the Prejudgment Claim of Right of Possession served in compliance with CCP 415.46? [ ] YES [ ] NO

### WHAT IS REQUIRED FOR SERVICE?

- Original *Writ of Possession for Real Estate*
- Original signed *Writ of Possession – Real Property (Eviction)*
- Original signed *Property Damage Waiver – Release of Liability*
- Initial Service Fee: \$145 per unit

**TO THE MENDOCINO COUNTY SHERIFF:** Please remove the occupants from the premises described below in the manner prescribed by law and peaceably restore the below property to its rightful owner. (Law Enforcement of a writ of possession of real property is governed by Section 715.020 of the Code of Civil Procedure.).

**1. Please provide a description of the property or a map if necessary.**

a. Who are we evicting? \_\_\_\_\_

b. What is the full address? \_\_\_\_\_

c. Is there an access/gate code or key card required for entry? [ ] NO [ ] YES, the code is: \_\_\_\_\_

**2. Who will be meeting the Sheriff at the time of eviction/restoration?**

NAME: \_\_\_\_\_ CONTACT #: \_\_\_\_\_

EMAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

You should be at the property no less than **10 minutes prior** to the scheduled restoration time. The scheduled restoration time will be provided to the above listed individual by email or fax no later than the Friday prior to your lockout date. If the Plaintiff / Attorney listed on the *Writ of Possession* does not receive the eviction date/time (2) days prior to the lockout, please contact our office immediately. X \_\_\_\_\_

1. This eviction is a result of: (circle one)

**FORECLOSURE   FAILURE TO PAY RENT   VIOLATION OF AGREEMENT   ILLEGAL ACTIVITY**

Please explain: \_\_\_\_\_

2. Are the tenants, occupants or visitors involved in DRUGS or GANGS?     NO    YES, see below:

\_\_\_\_\_

3. Do the tenants, occupants or visitors OWN or POSSESS WEAPONS?     NO    YES, see below:

\_\_\_\_\_

4. Have the tenants, occupants or visitors been VIOLENT or made THREATS toward you, Law Enforcement or anyone else regarding this eviction?     NO    YES, see below:

\_\_\_\_\_

5. Are their DOGS on the property?     NO    YES, see below:

How many \_\_\_\_\_ Breed(s) \_\_\_\_\_ Size(s) \_\_\_\_\_

6. Are their ELDERLY, BED RIDDEN or DISABLED tenants on the property?     NO    YES, see below:

\_\_\_\_\_

7. Are you aware of any DANGEROUS CONDITIONS / ILLEGAL ACTIVITY on or around the property?

NO    YES \_\_\_\_\_

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**NOTICE: ALL COMMUNICATIONS, REFUNDS & COLLECTIONS WILL BE MADE TO THE NAME LISTED BELOW  
(NO REFUNDS AFTER PROCESSING)**

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

\_\_\_\_\_  
MAILING ADDRESS    City    State    Zip Code

\_\_\_\_\_  
BUSINESS NAME, if applicable

\_\_\_\_\_  
Telephone # where you can be reached (8 a.m. ~ 5 p.m.)

\_\_\_\_\_  
Printed name of party requesting service  
Plaintiff representing him/herself or Attorney of Record (CCP 262)

ADDRESS/PHONE IS NOT ON ORDER and IS CONFIDENTIAL \_\_\_\_\_

\_\_\_\_\_  
Signature of party requesting service  
Plaintiff representing him/herself or Attorney of Record (CCP 262)

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**THE SHERIFF WILL NOT CANCEL ANY EVICTION WITHOUT WRITTEN AND SIGNED INSTRUCTIONS FROM THE PLAINTIFF'S ATTORNEY OR PLAINTIFF (if pro per). FAXED INSTRUCTIONS FROM THE PLAINTIFF'S ATTORNEY OR PLAINTIFF (if Pro Per) WILL BE SUFFICIENT TO CANCEL AN EVICTION. WE DO NOT ACCEPT PHONE CANCELATIONS.**

**NOTE: THE SHERIFF IS ENTITLED TO HIS FEE FOR SERVICE, WHETHER OR NOT THE SERVICE IS SUCESSFUL.  
(GOVT CODE 26738)**

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*FOR OFFICE USE ONLY*

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Initials: \_\_\_\_\_     Counter    Mail    Cash    Check # \_\_\_\_\_    Credit    Waiver



# Property Damage Waiver – Release of Liability

## Instructions to the Sheriff of Mendocino County

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Date: \_\_\_\_\_ Court Case Number: \_\_\_\_\_

Property Address: \_\_\_\_\_

I am the Plaintiff or Plaintiff's Agent in the above referenced case. I am authorized to act on behalf of the Plaintiff in this matter. Plaintiff acknowledges that *it may* be necessary during the eviction for the Mendocino County Sheriff's Office to force entry into the above referenced property. Plaintiff further acknowledges that during the eviction, if forced entry is necessary, some property damage may occur as a result. Plaintiff will not hold the Mendocino County Sheriff's Office, the County of Mendocino, or any employee of the County of Mendocino liable for any property damages.

Plaintiff hereby waives and releases any and all rights, claims, or future causes of action for property damage against the County of Mendocino, the Mendocino County Sheriff's Office; its elected or appointed officials, officers or employees as a result of the forced entry into the above referenced property.

I have carefully read this waiver and release of liability, fully understand its content, and have freely and voluntarily signed this document.

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
SIGNATURE