



Anglia Bailiffs

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SS7 5HA

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Instruction & Indemnity To Act as Landlords Agent

Occupant
Tenant: & Landlord:

Contact details of Occupant / Tenant:

T: _____
M: _____
E: _____

Date and Time of Attendance Required:

Date: _____
Time: _____

Address Attendance Required :

Return of Keys Details

Name: _____
Address: _____

To AWT Associates Ltd T/A Anglia Bailiff Services (company registration no 12578681)

I/We hereby request your officers and agents attend at the identified address detailed at the time and date above to act as my/our agent: and for so doing, this shall be your sufficient instruction and indemnification against all actions at law, as well as against all fees, costs, charges or expenses which you may incur or be liable to pay by reason of your executing this instruction and do hereby undertake not to hold you accountable for any goods removed by the occupant, ex-tenant or any other third party.

I further confirm that I am in a position to authorise the actions set out above.

Instructing client details

Reference:

Company/Name:

Address:

Contact Information:

T: _____
M: _____
E: _____

Out of Hours Contact Name:

Contact Number: T: _____ M: _____

Invoices chargeable to:

Print Name:

Date:

Sign: