

Fast Eviction Service

634 Oak Court • San Bernardino, CA 92410 • (909) 889-2000 • (800) 686-8686 • Fax (909) 889-3900
www.fastevictionservice.com • intake@fastevictionservice.com

COLLECTION DEPARTMENT

Dear Landlord:

The eviction process may have set you back financially and now it is time to think about trying to recoup the lost rent money. Fast Eviction Services collection department can assist you in recovering any money that is owed to you by your ex-tenant for rent or physical damages to your property.

In order to collect for you, we must first obtain a money judgment. If you would like for us to assist you in recovering money that is owed to you. We will obtain a money judgment for you at no cost. We charge no out of pocket expenses. We work on a commission only basis, the commission fee that is charged is 40% of what is collected.

Before proceeding with collections against your ex-tenant, we require a signed collection agreement. If you would like for Fast Eviction Services collection department to assist you in recovering your money, please find enclosed a collection agreement form. Please fill out this agreement providing us with as much information as you can on your ex-tenant. Rental applications and credit applications are exceptionally helpful. Please mail the collection agreement; a copy of the credit application; and a copy of the security deposit accounting (if applicable) to Fast Eviction Service.

If there is significant property damage, please contact us to discuss the possibility of beginning a small claims action. Please be advised that there is a fee to file and serve a small claims case.

If you have any questions please contact my office as soon as possible, and remember that 60% of something will always be better than 100% of nothing.

We appreciate your business!

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FAX COVER SHEET

ATTENTION: COLLECTION DEPARTMENT

REQUEST FOR NEW COLLECTION

DATE: _____

FROM: _____
(sender's name, address, telephone number)

EMAIL: _____

PHONE # _____ **FAX#** _____

CELL #: _____

RE: _____ **V.** _____
Owner/Apt. Complex Name **Tenant(s) / Occupant(s)**

Tenant's Email

CASE # _____

Enclosed please find the following:

_____ **Signed Collection Agreement**

_____ **Copy of Rental Application**

_____ **Copy of Cancelled Rent Check**

_____ **Disposition of Security Deposit**

_____ **Other (copy of drivers license, social security card, copy of pay stub)**

_____ **Email Tenants**

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Collection Agreement

The **Plaintiff:** _____ (hereinafter referred to as Assignor) and Fast Eviction Service (hereinafter referred to as Assignee.) **AGAINST THE DEFENDANT(S):** _____

Civil Case #: _____. The parties agree as follows: Assignor for valuable consideration, transfers to Assignee Forty (40) percent undivided interest in the above described Judgment. Valuable consideration is Assignee's agreement to advance costs in attempting to collect this Judgment and/or to spend time in attempting to collect this Judgment. Assignor agrees to promptly notify Assignee of any payment received or contact made by the defendant, and agrees to immediately remit Assignee Forty (40) percent of any and all payments received directly from the defendant after the date of this assignment. Assignor has no knowledge that the debtor(s) has died, filed for bankruptcy protection or become a member of the armed forces since the date the above-described judgment was entered.

Assignor - Plaintiff	Date	Home Phone	Work Phone	FAX
_____	_____	_____	_____	_____
Address	_____	City	State	Zip Code
_____	_____	_____	_____	_____
Email	_____			

DEFENDANT INFORMATION

NOTE: The more information you can provide us with on the Defendant(s) the quicker we can help you collect your money!!!

Tenant #1: _____ Social Security #: _____ - _____ - _____

Present Address: _____ Phone #: _____

Email: _____ Cell #: _____

Owns Property? _____ Where: _____

Employer Name: _____ Phone #: _____

Employers Address: _____

Bank Name: _____ Bank Address: _____

Checking Account #: _____ Savings Account #: _____

Tenant #2: _____ Social Security #: _____ - _____ - _____

Present Address: _____ Phone #: _____

Email: _____ Cell #: _____

Owns Property? _____ Where: _____

Employer Name: _____ Phone #: _____

Employers Address: _____

Bank Name: _____ Bank Address: _____

Checking Account #: _____ Savings Account #: _____

**** A Copy of your Rental Application may be substituted for above tenant information. ****

RENTAL APPLICATION

Thank you for applying to rent with us. Please provide us with all the information requested below. Incomplete information will only delay the processing of your Rental Application. **PLEASE PRINT CLEARLY.**

OCCUPANTS

NAME _____ SS# _____ DATE OF BIRTH ____/____/____
First Middle Last Jr. Sr. I III MO DAY YR

OTHER NAMES YOU'VE USED _____
First Middle Last First Middle Last

SPOUSE _____ SS# _____ DATE OF BIRTH ____/____/____
First Middle Last Jr. Sr. I III MO DAY YR

PHONE () _____ () _____
Area Code Home Area Code Work

FULL NAME (ALL OTHERS)	AGE	RELATIONSHIP

RENTAL HISTORY

PLEASE LIST YOUR RENTAL HISTORY FOR NO LESS THAN TWO YEARS.

1) CURRENT ADDRESS _____
Number Street Apt. No. City State Zip

FROM _____ TO _____ AMT RENT PAID _____ APT. COMPLEX NAME _____
MO/YR MO/YR

OWNER/MGR _____
Full Name Number Street Apt. No. City State Zip

MORTGAGE CO. (IF OWNED) _____
Name Address Loan No.

OWNER/MGR OR MORTGAGE CO. PHONE # () _____ REASON FOR LEAVING _____
Area Code (Daytime)

2) PREVIOUS ADDRESS _____
Number Street Apt. No. City State Zip

FROM _____ TO _____ AMT RENT PAID _____ APT. COMPLEX NAME _____
MO/YR MO/YR

OWNER/MGR _____
Full Name Number Street Apt. No. City State Zip

MORTGAGE CO. (IF OWNED) _____
Name Address Loan No.

OWNER/MGR OR MORTGAGE CO. PHONE # () _____ REASON FOR LEAVING _____
Area Code (Daytime)

3) PRIOR ADDRESS _____
Number Street Apt. No. City State Zip

FROM _____ TO _____ AMT RENT PAID _____ APT. COMPLEX NAME _____
MO/YR MO/YR

OWNER/MGR _____
Full Name Number Street Apt. No. City State Zip

MORTGAGE CO. (IF OWNED) _____
Name Address Loan No.

OWNER/MGR OR MORTGAGE CO. PHONE # () _____ REASON FOR LEAVING _____
Area Code (Daytime)

EMPLOYMENT

CURRENT EMPLOYER _____ ADDRESS _____
Company Name Street City State Zip

GROSS MONTHLY SALARY \$ _____ POSITION/MIL. GRADE _____ HOW LONG _____ YRS _____ MOS.

SUPERVISOR _____ BUSINESS PHONE () _____
Full Name Position Area Code

SPOUSES EMPLOYER _____ ADDRESS _____
Company Name Street City State Zip

GROSS MONTHLY SALARY \$ _____ POSITION/MIL. GRADE _____ HOW LONG _____ YRS _____ MOS.

SUPERVISOR _____ BUSINESS PHONE () _____
Full Name Position Area Code

BANKING INFORMATION

CHECKING ACCOUNT _____
 Bank Name Branch City Phone Account No.

SAVINGS ACCOUNT _____
 Bank Name Branch City Phone Account No.

REFERENCES

FAMILY _____
 Full Name Number Street
 City State Relationship Phone

EMERGENCY _____
 Full Name Relationship Phone

MISCELLANEOUS INFORMATION

ADDITIONAL INCOME _____
 Description Amount How Often?

PETS _____
 Description Number

WATER-FILLED FURNITURE _____
 Description

AUTOMOBILES/MOTORCYCLES/BOATS TO BE PARKED ON PREMISES:

Make	Model	Year	License Number
_____	_____	_____	_____
_____	_____	_____	_____

HAVE YOU EVER BEEN DELINQUENT IN PAYMENT OF YOUR RENT OR ANY OTHER FINANCIAL OBLIGATION? IF YES, PLEASE EXPLAIN:

HAVE YOU EVER BEEN A DEFENDANT IN AN UNLAWFUL DETAINER (EVICTION) LAWSUIT OR DEFAULTED (FAILED TO PERFORM) ANY OBLIGATION OF A RENTAL AGREEMENT OR LEASE? IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER FILED FOR BANKRUPTCY? FSO, PROVIDE DATE OF DISCHARGE: _____

The information on this application is true and correct to the best of my knowledge. I hereby authorize _____ or its agents to verify the above information and obtain either a consumer or investigative credit report. I understand that the \$ _____ fee for verifying this rental application is not a deposit of rent, and will not be applied to future rent, or refunded, even if this application to rent is declined. NOTE: ALL APPLICANTS MUST SIGN BELOW.

SIGNATURE _____ DATE _____
 SIGNATURE _____ DATE _____

VERIFICATION RESULTS - FOR OFFICE USE ONLY

NOTE TO MANAGER: Verify driver's license number and advise applicant to authorize employers, banks, and landlords to release all relevant information.

APPLICATION _____ D/L # _____
 APPLICATION _____ D/L # _____
 INVOICE # _____ RESULTS _____ DATE _____
 REMARKS _____
 MOVE IN DATE _____ UNIT # _____ UNIT TYPE _____ RENT _____
 NOT ACCEPTED: REASON _____
 ADVISED APPLICANTS _____

DISPOSITION OF SECURITY DEPOSIT

[PER CCP 1950.5 (e)]

Apt. project: _____

Tenant's name: _____

Apt. address: _____

Forwarding address: _____

Date of 30 Day Notice received in writing: _____

Date apt. vacated: _____ Rent paid to date: _____

Monthly rental rate: \$ _____ Daily rental rate: \$ _____

Move-in date: _____ Total deposits rec'd: \$ _____

DEDUCTIONS FROM DEPOSIT

Rent owed to vacate \$ _____

Rent owed to 30 Day Notice \$ _____

Apt. cleaning \$ _____

Carpet cleaning \$ _____

Drapery cleaning \$ _____

Painting \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total deductions: \$ _____

Total deposit received: \$ _____

Rent credit: \$ _____

Net refundable deposit to tenant: \$ _____

Balance due from tenant/landlord: \$ _____

Landlord:

If no forwarding address, mail to your vacated unit. If you are deducting \$125 or more, it is necessary to include receipts or estimates.