WARRANT TO DISTRAIN

We hereby authorise and empower you to seize and distrain on the goods, chattels and effects upon the premises at:

Full Address:

Post Code:

On the tenant (or his under-tenants):

For the sum of:

£

Being arrears of rent due to (Landlord)

On the:

day of   20

For your so doing, this shall be sufficient Warrant, Authority and Indemnification against all costs and charges of Law Expenses, action or actions that may be brought against you as well as any other charges and expenses that you may incur or be liable to on this account. We hereby Undertake not to hold you accountable for any goods forcibly or clandestinely removed from the above named premises. We hereby agree to allow you a commission of 5% upon the amount of rent distrained for or credited whichever may be the greater (excluding any VAT element). This commission is beyond the legal and other reasonable expenses. Should you be unable to execute the Warrant by reason of claims, removal or other legal difficulties or should I/We withdraw or abandon this distress, I/We agree to pay on demand the Levy Fee chargeable upon the above Rent together with the expenses of travelling and of taking a possession man with you and his pay.

PLEASE NOTE: Commission will only be charged on the actual amount of rent distrained for or credited whichever may be the greater and will not be charged on any VAT element.

Rent:

VAT:

Is there any licence to underlet the premises in any way?
Are there any taxes, rates, other charges/ deductions to be allowed. If so, please state what and how much.

How is the rent reserved and under what demise are the premises held?

Are there any effects belonging to you on the premises?

If dwellinghouse or flat, is it decontrolled?

Has leave to distrain been obtained?

Given under my/our hand this:

day of   20

PLEASE NOTE: WHERE THE LANDLORD IS A LIMITED COMPANY THEN IN SIGNING THIS AGREEMENT, THE PERSON SIGNING ACKNOWLEDGES THAT HE/SHE WILL PAY TO C W HARRISON & SON FORTHWITH THE MONIES DUE TO THEM AS SET OUT ABOVE IN THE EVENT THAT THE COMPANY FAILS TO MAKE PAYMENT WHEN THE SAME IS DUE.

Signed (as Landlord/Agent to Landlord/Solicitor)

Print Name

Address

Telephone No:

Email Address: