

# LETTER OF INSTRUCTION WRIT OF ENFORCEMENT

TO: ALTERNATIVE BAILIFF SERVICES LTD  
109 – 1289 Highfield Crescent SE  
Calgary, AB  
T2G 5M2

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## PLEASE PROCEED WITH ENFORCEMENT PROCEEDINGS AGAINST:

NAME OF DEBTOR(S): \_\_\_\_\_

DEBTOR'S D.O.B.: \_\_\_\_\_

DEBTOR'S ADDRESS: \_\_\_\_\_

DEBTOR'S EMPLOYMENT:  
(if known) \_\_\_\_\_

DEBTOR'S PHONE/CELL#'S: \_\_\_\_\_

Please enclose copies of the required documents listed below and any other relevant info:

COPY OF WRIT OF ENFORCEMENT  CERTIFICATE OF JUDGEMENT  PPR REGISTRATION

TOTAL WRIT AMOUNT (\$) AS REGISTERED WITH PPR: \_\_\_\_\_

COLLATERAL TO BE SEIZED: \_\_\_\_\_

LOCATION OF PROPERTY: \_\_\_\_\_  
(if different from debtor's address)

SPECIAL INSTRUCTIONS OR EXTENUATING CIRCUMSTANCES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I/We the undersigned hereby authorize Alternative Bailiff Services Ltd. and its acting to seize collateral on our behalf and leave it on a Bailee's Undertaking with the Debtor or another responsible party, who will have control of the Collateral. I/We the undersigned hereby indemnify Alternative Bailiff Services Ltd. and its agents and employees in respect to its fees, charges, expenses, and any claims for damages whatsoever that may be incurred by them with regards to their execution of this mandate on my/our behalf or anything completed in relation thereto. This indemnity shall continue to be in effect and cover all services requested by the customer. In the event of litigation to which this indemnity applies, the customer agrees to fund, during the course of such litigation, the legal defence costs of Alternative Bailiff Services Ltd. and its directors, shareholders, employees and agents. All information shall be treated as privileged and confidential and will not be released to any other party without prior written authorization by the client or authorized representative. I/we authorize Alternative Bailiff Services Ltd., its agents and employees to act on our behalf and be our agents with regards to their execution of this mandate or anything completed in relation thereto. We also provide Alternative Bailiff Services Ltd. authorization to sign documents on our behalf.*

INSTRUCTING CLIENT (NAME OF COMPANY): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

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

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
NAME (PRINT)