Associated Eviction Services

10215 - 178 Street, Edmonton, AB T5S 1M3 Tel: (780) 455.1101 Fax: (780) 455.1191 wwww.evictionservices.ca

- Step 1 Print and Complete Purchase Order Form
- Step 2 Fax Purchase Order Form to Associated Eviction Services
- Step 3 *Receive Purchased Documents by E-mail from Associated Eviction Services
- <u>Note:</u> *Allow minimum 2 full business days from date of submitting Purchase Order "FORMS & NOTICES" PURCHASE ORDER

| Form Title | <u>Basic</u> Package | <u>Standard</u> Package | <u>Comprehensive</u> <u>Package</u> | Individual Forms |
|--|-------------------------|----------------------------|--|--------------------------------------|
| 24 HOUR Notice of Entry | x | x | х | |
| 14 DAY Termination of Tenancy | x | x | х | |
| 24 HOUR Termination of Tenancy | x | x | х | |
| 14 DAY Notice to Vacate (Unauthorized Persons) | | | х | |
| 48 HOUR Notice to Vacate (Unauthorized Persons) | | | х | |
| Notice of Increase | x | x | х | |
| Notice (from Tenant) to Terminate Tenancy | FREE | FREE | FREE | FREE |
| Notice (to Tenant) to Terminate Monthly Periodic Tenancy | | | х | |
| Current Statement of Account / General Ledger | | x | х | |
| Interim Security Deposit Statement of Account | | | х | |
| Security Deposit Statement of Account | | х | х | |
| Price excluding GST | \$40 | \$50 | \$75 | \$9 each (minimum 5 forms) |
| Select package/s | | | | |

| Order Date (dd/mm/yy) | | | |
|---|------------------|--|--|
| Full Name of Purchaser | | | |
| Company Name | | | |
| Telephone Number (incl. area code) | | | |
| Fax Number (incl. area code) | | | |
| E-mail Address | | | |
| Visa 🗌 MasterCard 🗌 | Card Number | | |
| Cheque (Payable to Associated Eviction Services) | Card Expiry Date | | |
| Card Authorized Signature | • | | |
| The Authorized Purchaser hereby acknowledges to have read the Disclaimer, Terms and Conditions posted on evictionservices.ca. Associated Eviction Services hereby undertakes not to divulge or share information provided on this order form. | | | |