SUPPLEMENTAL ATTACHMENT TO SER-001A

Case Number: _____

{3. a(1)} _____

Defendant Address: _____

{3. a(3)}	**1st Occupant**	**2nd Occupant**	**3rd Occupant**
Full Name			
Date of Birth			
CDL #			
Phone #			
Gender/Height/Weight/ Hair Color/Eye Color/Race			
Vehicle Information (make, model, color, license plate #)			

{3. a(4)} This eviction is a result of: ☐Failure to Pay Rent ☐Violation of Agreement ☐Illegal Activity

Please specify WHICH TENANT, OCCUPANT OR VISITOR any explanation below pertains to (e.g. "John Doe is a known gang member" or "Jill Doe is bed-ridden" or "Jack Doe speaks Spanish only").

(1) Do you believe the tenants, occupants or visitors are involved with DRUGS or GANGS? ☐No ☐Yes
If yes, explain below:

(2) Do you have reason to believe the tenants, occupants or visitors OWN or POSSESS WEAPONS? ☐No ☐Yes
If yes, explain below:

(3) Are you aware that the tenants, occupants or visitors been VIOLENT or made any THREATS towards anyone? ☐No ☐Yes
If yes, explain below:

(4) Do you know of any ILLEGAL ACTIVITY/POLICE CONTACT that has/is taking place at this address? ☐No ☐Yes
If yes, explain below:

(5) Are there any SECURITY CAMERAS on the property (yours or tenant's, including doorbell camera)? ☐No ☐Yes
If yes, state where they are located:

(6) Are you aware of DOGS in the subject property? ☐No ☐Yes
If yes: How many? Size(s)? Breed(s)? Aggressive?

(7) Are you aware of ELDERLY, BED RIDDEN, DISABLED or NON-ENGLISH SPEAKING occupants in the subject property? ☐No ☐Yes
If yes, explain below:

(8) Are you aware of CHILDREN in the subject property? ☐No ☐Yes
If yes: How many? Approximate Age(s)?

{4}. Is there an Access/Gate code required to gain entry? ☐No ☐Yes, the code is:

{5. f} Who will be meeting the Sheriff's Deputy at the time of eviction/restoration?

Name: _____ Title: _____Cell Phone #: _____