

**SEIZURE WARRANT
AUTHORIZATION AND DIRECTION**

**TO: KENNEDY & ASSOCIATES, BAILIFFS INC.
our Bailiff on this behalf or its Appointee**

DATE: _____ **ACCOUNT NO.:** _____

YOUR INSTRUCTIONS

WARRANT TO SEIZE: () **POSSESSORY RIGHT:** () **LIEN ONLY:** ()

VS.

DEBTOR INFORMATION

DEBTORS NAME: _____

HOME ADDRESS: _____

CITY: _____ **PROVINCE:** _____ **POSTAL CODE:** _____

WORK ADDRESS: _____

CITY: _____ **PROVINCE:** _____ **POSTAL CODE:** _____

PHONE NUMBER: _____ **HOME:** () **WORK:** ()

SECURITY/VEHICLE INFORMATION

YEAR: _____ **MAKE:** _____ **MODEL:** _____

SERIAL NUMBER: _____

LICENCE: _____ **COLOUR:** _____

DEFAULT DETAILS AND INDEMNITY

Wherever the same may be found under the terms of certain: _____ **DATED:** _____

Default having been made in conditions thereof, for the purposes of realizing the sum of \$ _____

We hereby agree to protect, reimburse, hold harmless and indemnify you against any and all claims for _____

damages and costs which may be made against you by reason of your acting under our instructions and _____

unconditionally guarantee all fees and costs. _____ *(Initials)* _____

As witness our hand and seal at (city/town) _____ *in the Province* _____

of Ontario _____ this _____ day of _____ A. D., 20 _____

I HAVE THE AUTHORITY TO BIND THE CORPORATION/PROPRIETORSHIP/PARTENRSHIP

AUTHORIZED SIGNATURE

PRINT NAME, TITLE & TELEPHONE NUMBER

Lien Amount: _____	_____
File Fee: _____	= GST () + _____
Other Charges: _____	_____
Total: _____	_____
GST Registration: 86565-9619-RT0001	