

PRIORITY SERVICE DIRECT

PROCESS SERVING & SKIP TRACING

PLEASE TAKE NOTE!

**THE FIRST (10) TEN PAGES OF ALL DOCUMENTS
TRANSMITTED TO PS DIRECT EITHER BY FAX OR EMAIL,
ARE AT NO ADDITIONAL CHARGE. HOWEVER, PLEASE ADD
AN ADDITIONAL 10 CENTS FOR EACH ADDITIONAL PAGE.**

THANK YOU FOR LETTING US SERVE YOU

PLEASE VISIT US AT WWW.PS-DIRECT.COM FOR ALL TERMS & CONDITIONS



Psd411@gmail.com

REQUEST FOR SERVICE

Please print clearly!!

Tel no. (866) 534-6612

Fax no. (714) 455-2988

Your email address _____

So that we can better serve you, we have online status. Please provide us with your email address for a password and visit www.priorityservicedirect.com

YOUR NAME & ADDRESS:				RUSH <input type="checkbox"/>		ROUTINE <input type="checkbox"/>	
				YOUR COURT DATE _____ (DATE)			
PHONENO.				LAST DAY TO SERVE _____ (DATE)			
COURT:				CASE NO:			
PLAINTIFF:				SENDER'S REF. NO:			
DEFENDANT:							
WHAT DOCUMENTS ARE WE SERVING? (Exactly as it should appear on the affidavit of service)							
WHO ARE WE SERVING? (Exactly as it should appear on the affidavit of service)							
WHAT IS THEIR RESIDENTIAL ADDRESS?				WHAT IS THEIR BUSINESS ADDRESS?			
PHONE NO:				PHONE NO:			
DESCRIBE	Age:	Sex:	Race:	Hgt:	Wgt:	Hair Color:	Glasses?
THE PERSON(S):							

(EMAIL A PHOTOGRAPH OF THE PERSON IF ONE IS AVAILABLE)

IMPORTANT!! SERVICE MUST BE MADE IN THE MANNER CHECKED BELOW:

PERSONAL SERVICE: By personally delivering copies to the person being served.

SUBSTITUTED SERVICE AT RESIDENCE: By personally delivering copies to the dwelling house or usual place of abode of the person (or authorized person on behalf of an entity) being served. Person receiving documents must be at least _____ years of age and should be informed of the general nature of the documents. If the documents are served in this manner you should/should not mail copies of same to the address where the papers were left. For additional requirements, if any, see below. May be sub on _____ attempt.

POSTING: By posting copies in a conspicuous manner to the address of the person/entity being served. If the documents are served in this manner, you should/should not mail copies of same to the address where the papers were left. For additional requirements, if any, see below. May be sub on _____ attempt.

<input type="checkbox"/> NOTARIZE AFFIDAVIT (Fee in some areas)	WITNESS FEE ATTACHED: \$ _____
<input type="checkbox"/> USE OUR PROOF OF SERVICE (enclosed)	
<input type="checkbox"/> RETURN PROOF OF SERVICE BY OVERNIGHT DELIVERY (Additional fee)	

SPECIAL INSTRUCTIONS:

READ ALL TERMS & COMDITIONS AT WWW.PRIORITYSERVICEDIRECT.COM