



NYC Department of Finance • Office of the Sheriff



## EVICTON INTAKE

Mail to: County Office of the Sheriff where the services are to be made. County Sheriff locations are listed on the reverse side.

**Instructions:** Please attach a copy of your Court/Judgment/Order to this form. Read the entire page before completing and see reverse side for information regarding borough locations of the Office of the Sheriff.

**THE SERVICE FEE IS \$140.00 FOR EVICTION (\$15.00 for each Additional Tenant)**

### SECTION I - LANDLORD INFORMATION

Landlord: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
PRINT FIRST NAME PRINT LAST NAME

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZipCode: \_\_\_\_\_  
NUMBER AND STREET APT. NO.

### SECTION II - COURT INFORMATION

The Judgment of Possession was obtained in the following Court:

☐ CIVIL COURT ☐ LANDLORD/TENANT COURT ☐ SUPREME COURT ☐ OTHER COURT

Court Index: \_\_\_\_\_ Date of Entry of Judgment: \_\_\_\_\_  
MM DD YYYY

Court Address and County: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZipCode: \_\_\_\_\_  
NUMBER AND STREET COUNTY

### SECTION III - SUBJECT INFORMATION

Tenant To Be Evicted: \_\_\_\_\_ Telephone No. (if known): \_\_\_\_\_  
PRINT FIRST NAME PRINT LAST NAME

Address: \_\_\_\_\_ Borough: \_\_\_\_\_ ZipCode: \_\_\_\_\_  
NUMBER AND STREET APT. NO.

**AT RISK INFORMATION:** Is any party being evicted elderly (over 60), handicapped or mentally infirm? ☐ YES ☐ NO  
If yes, please state condition:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SECTION IV - GENERAL INFORMATION

Indicate below any information which may be helpful in effecting a prompt and safe eviction of the tenants: i.e., best time to serve 72 hour notice, criminal activity at location, threats of violence, animals or any other behavior or circumstance.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SECTION V - CERTIFICATION

The undersigned hereby affirms to the best of his/her knowledge that the eviction mandate being filed is in full effect, and request is made to the Sheriff for its enforcement by statutory authority.

Landlord/Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **OFFICE OF THE SHERIFF COUNTY LOCATIONS**

### **NEW YORK**

Office of the Sheriff  
66 John Street, 13th Floor  
New York, NY 10038  
(212) 487-9734

### **KINGS**

Office of the Sheriff  
345 Adams Street, 5th Floor  
Brooklyn, NY 11201  
(718) 488-2300

### **BRONX**

Office of the Sheriff  
Bronx Customer Service Center  
3030 Third Avenue, 2nd Floor  
Bronx, NY 10455  
(718) 993-3880

### **QUEENS**

Office of the Sheriff  
144-06 94th Avenue, 2nd Floor  
Jamaica, NY 11435  
(718) 558-2090

### **RICHMOND**

Office of the Sheriff  
Staten Island Business Center  
350 St. Marks Place, Room 409  
Staten Island, NY 10301  
(718) 815-8407

## **INCOME EXECUTION LOCATION**

Office of the Sheriff  
66 John Street, 13th Floor  
New York, NY 10038  
(212) 487-8002



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## CONSTRUCTIVE POSSESSION

COURT OF THE STATE OF NEW YORK

COUNTY OF \_\_\_\_\_

\_\_\_\_\_  
Plaintiff/Petitioner/Landlord

VS.

\_\_\_\_\_  
Defendant/Respondent/Tenant

**SHERIFF'S CASE #**  
**DOCKET/INDEX #**

To the Sheriff of the City of New York:

Pursuant to the order/warrant herein, you are directed to give the plaintiff(s)/petitioner(s)/landlord(s) possession by delivering such without removing any contents. Plaintiff(s)/petitioner(s)/landlord agree to be responsible for all property on the premise and agree to deliver to defendant(s)/respondent(s)/tenant(s) upon their demand, any such contents to which they are entitled.

Pursuant to this direction, plaintiff(s)/petitioner(s)/landlord(s) release the Sheriff and/or his Deputies from any liability and agrees to save the Sheriff and/or his Deputies harmless from any action resulting from the enforcement of this mandate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Telephone #

CIVIL COURT OF THE CITY OF NEW YORK

COUNTY OF \_\_\_\_\_ HOUSING PART: \_\_\_\_\_ Index No. L & T \_\_\_\_\_

_____	Petitioner/Landlord
AGAINST	
_____	Respondent/Tenant

**REQUEST  
FOR  
FINAL ORDER  
AND ISSUANCE  
OF WARRANT**

*To the Clerk of the Civil Court of the City of New York.*

**YOU ARE HEREBY REQUESTED TO SUBMIT THE PAPERS IN THE ABOVE ENTITLED PROCEEDING TO THE JUDGE FOR A FINAL ORDER/JUDGMENT, IF NECESSARY, SO THAT A WARRANT OF EVICTION MAY ISSUE TO THE SHERIFF OF THE CITY OF NEW YORK.**

\_\_\_\_\_  
(Print name beneath signature)

Date: \_\_\_\_\_, 20\_\_\_\_

County of \_\_\_\_\_