

LONDON Solar House, 915 High Road, North Finchley, London, N12 8QJ

Are you the Claimant or are you acting on behalf of the Claimant?

Direct House Greenwood Drive, Manor Park, Runcorn, WA7 1UG Tel: 0203 2980201 Tel: 01606 780510

NORTH WEST

MIDLANDS Colmore Plaza, 20 Colmore Circus, Queensway, Birmingham, B4 6AT Tel: 0121 2792033

SCOTLAND 126 West Regent Street, Glasgow, G2 2RQ

Tel: 0141 2832098

28 Cathedral Road, Cardiff CF11 9LJP

Sophia House,

WALES

Tel: 02920 538137

Authority to Transfer Up

\Box The Claimant – The Party that is owed the money (as appears on the Judgment).				
☐ Acting on behalf of the Claimant				
About You & The Judgment				
Your Name: (The Claimant)*				
Your Name: (Acting on behalf of the				
Claimant)*				
Company Name: (If applicable)				
Your Address Line: 1*				
Your Address Line: 2				
Your Town / City:*				
Your Postcode:*				
Your Internal Reference: (If applicable)				
Telephone:*				
Email:*				
County Court Claim No:*				
Are you VAT registered:*				
If Yes, please supply number below				
VAT Number:				
Claimant Name:*				
(as appears on judgment or order)				
About The Defendant				
Name:*				
Company Name: (If applicable)				
Address/s provided to the court for issue of judgment.				
Address Line 1:*				
Address Line 2:				
Town / City:*				
Postcode:*				
Second Address				
Address Line 1:				
Address Line 2:				
Town / City:				
Postcode:				



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Is the name/address of the creditor/debtor different to the request for the issue of the judgment?							
	If Yes,						
Yes or No		As per CPR 83.10, in circumstances where there has been a change of address of a party, a witness statement must be filed with the request for a writ.					
		The statement must confirm that the name and address of the debtor detailed in the request is being sued as the name and address of the debtor detailed in the judgment or order.					
	Please nr	ovide address for	enforcement helow	ı			
Please provide address for enforcement below. Address for Enforcement							
Address Line		<u> </u>					
Address Line 2:							
Town / City:*							
Postcode:*							
Telephone:	(If known)						
What does the debt relate to?							
Useful Infor	mation:*						
Have you previously used any of DCBL's Yes / No If yes, please provide reference num				If yes, please provide reference number:			
service for the named defendant?							
Any Additional Addresses							
Authorisation							
Louthonics Direct Collection Doiliffe Ltd of Direct House Creenwood Drive Money Bork							
	I authorise Direct Collection Bailiffs Ltd of Direct House, Greenwood Drive, Manor Park,						
		Runcorn, Cheshire, WA7 1UG to sign Form N293A and obtain a Writ of Control on my pehalf. I have also read understood and agreed to DCBL's Terms and Conditions					
Denail. I have also read understood and agreed to Debt 3 Terms and conditions							
Print	Name						
Signa	ture						
Date							