



# WOLFCO BAILIFFS

A Division of Matrix Communications Management, Inc

*"Recoveries with Integrity"*

## TRACE REQUEST FORM

NAME(S): \_\_\_\_\_

SPOUSE: \_\_\_\_\_ LIABLE? Y / N

S.I.N.: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

CITY & PROVINCE: \_\_\_\_\_ P/C: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_

CITY & PROVINCE: \_\_\_\_\_ P/C: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

VEHICLE INFO: \_\_\_\_\_ COLOUR: \_\_\_\_\_ PLATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

CLIENT: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/PROVINCE: \_\_\_\_\_

Upon so acting on your behalf to provide skip tracing services related to information requested. We irrevocably agree to indemnify you and save you harmless from all loss, damage and expense (including any legal fees, disbursements and court costs) at which you may incur or suffer arising from or as a consequence of acting on our behalf. We agree to pay your reasonable fees as set forth in your current schedule of fees and such expenses as they may be incurred. We also confirm that we do not rely upon you or your employees for legal advice with respect to acting on our behalf. The initial \$ 150.00 is non refundable and is required as prepayment at the time of submitting the request. Any balance due must be paid in full prior to the release of information.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

Mailing: 43076 RPO CASCADES Burnaby, BC V5G-4S2

Telephone: 604-595-REPO (7376) Fax: (604)599-4367

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Member of the Surrey Board of Trade/The Better Business Bureau/Greater Langley Chamber of Commerce