



**Cornwall Bailiff Services**  
Woodbine Farm, Threemilestone,  
Truro, Cornwall, TR3 6BW  
**Tel:** 0800 689 1093  
**E-mail:** [info@cornwallbailiffs.co.uk](mailto:info@cornwallbailiffs.co.uk)  
**Visit:** <http://www.cornwallbailiffs.co.uk>

**INSTRUCTION TO TRANSFER UP AND ENFORCE A JUDGMENT BY WRIT OF CONTROL**

**INSTRUCTION FORM**

**REF:** \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ Postcode: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Your Ref: \_\_\_\_\_

**CREDITOR DETAILS**

Creditor Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

Court Claim Number: \_\_\_\_\_

**DEBTOR DETAILS**

Debtor Name: \_\_\_\_\_

Enforcement Address: \_\_\_\_\_  
\_\_\_\_\_ Postcode: \_\_\_\_\_

Registered Address: \_\_\_\_\_  
\_\_\_\_\_ Postcode: \_\_\_\_\_

Trading Address: \_\_\_\_\_  
\_\_\_\_\_ Postcode: \_\_\_\_\_

Debtors Contact Details:  
Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_



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**ADDITIONAL DEBTOR INFORMATION**

Was your judgement obtained by default:  Yes  No

Please provide details of the nature of the debt:

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Approximately, when was the debt incurred: Date:        /        /        (day/month/year)

Enforcement Address:  Residential  Commercial

If the debtor is a person then please provide a description of them:

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**ABOUT THE DEBTOR**

Debtors date of birth: Date:        /        /        (day/month/year)

Are there any details of the debtor on the internet:  Yes  No (if yes please provide details)

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Are you aware of any recent changes in the debtors circumstances:        Yes        No (if yes please provide details)

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Do you have any details of any vehicles that the debtor uses:  Yes  No (if yes please provide details)

Registration Numbers: 

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Do you have any details of any other assets owned by the debtor:  Yes  No (if yes please provide details)

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**NOTES**

Please provide any other additional information that may assist enforcement:

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**Bank Details for Remittance**

Bank Name: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Sort Code: \_\_\_\_\_



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**AUTHORISATION**

I hereby consent to Cornwall Bailiff Services Limited requesting the issue a writ of control in the name of an authorised High Court Enforcement Officer, to sign any documents on my behalf in order obtain said writ and to act under that officers authority for the purposes of enforcement.

A payment for £161.00 to Cornwall Bailiff Services, this can be paid online by visiting [www.cornwallbailiffs.co.uk](http://www.cornwallbailiffs.co.uk) and clicking 'Pay Now' or by Bank Transfer (please request bank details for payment).

Copy of Judgement or Order (Copy of claim form if obtained online), Award or Settlement

I confirm that the details given are correct and accept any responsibility for any incorrect information given

*By submitting this authorisation, you hereby agree to the terms and conditions as laid out on our website.  
Terms and conditions are available to view at [www.cornwallbailiffs.co.uk/terms-and-conditions](http://www.cornwallbailiffs.co.uk/terms-and-conditions).*

Signed: \_\_\_\_\_ Date:        /        /        (day/month/year)