

# ISLAND COUNTY SHERIFF'S OFFICE

1 NE 7<sup>th</sup> St. Coupeville, WA 98239 PH: (360)678-4422 FAX: (360)679-7314  
www.islandcountywa.gov/sheriff

## WRIT INTAKE INFORMATION SHEET

CAUSE#	DATE RECEIVED	ICSO CASE#
POST NO LATER THAN		
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> RECEIPT#		CLERK INITIAL

RESIDENCE INFORMATION			
RCW 59.18.312 does not allow storage of property if tenant objects			
TYPE OF DWELLING (Single family residence, Apt, Mobile home)			
IF A MOBILE HOME, (Who owns the mobile)			
GENERAL INFORMATION			
TENANT(S) NAMES			
# OF CHILDREN / AGES			
ANY PETS		ANY KNOWN / FORESEEN PROBLEMS (Mental or health issues, weapons, drugs, etc)	
LANDLORD INFORMATION			
DATE / TIME OF EVICTION			
LOCATION (STREET ADDRESS)		CITY	
CONTACT PERSON (Person who will attend eviction / lockout)			PHONE OR FAX
PLAINTIFF'S ATTY			
EMAIL		PHONE	
SERVICE / POSTING INITIAL ORDER OUT TO SERVICE			DONE
OFFICE USE ONLY			
Certified copy mailed to Defendant	DATE		
First Class copy mailed to Defendant	DATE		
Copy mailed to Plaintiff	DATE		
Copy mailed / Faxed / Emailed to			
FINAL Order. Out to Service		COMPLETE	