

PLEASE PROVIDE A POSTAGE PAID SELF-ADDRESSED ENVELOPE FOR RETURN OF SERVICE

COSTS / PROCEDURES: COUNTY OF CHESTER - OFFICE OF THE SHERIFF
 REAL ESTATE CHESTER COUNTY JUSTICE CENTER
 610-344-6859 201 W MARKET STREET, SUITE 1201
 CIVIL PROCESS PO BOX 2746
 610-344-5978 WEST CHESTER, PA 19380-0989
 FAX: 610-344-5345

2. COURT NUMBER	
4. TYPE OF WRIT OR COMPLAINT	
	TIME STAMP

**SHERIFF SERVICE
 PROCESS RECEIPT AND AFFIDAVIT OF RETURN**

1. PLAINTIFF	
3. DEFENDANT	



5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE; OR DESCRIPTION OF PROPERTY TO BE LEVIED, ATTACHED, OR SOLD.
6. ADDRESS (Street, Apartment Number, City, State, ZIP Code)

7. INDICATE REQUESTED SERVICE: PERSONAL PERSON IN CHARGE DEPUTIZE CERT. MAIL POSTED OTHER

Now, _____ 20____, I, SHERIFF OF CHESTER COUNTY, PA, do hereby deputize the Sheriff of _____ County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff. _____ SHERIFF OF CHESTER COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE:

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN - Any deputy sheriff levying or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY AND FIRM	10. TELEPHONE NUMBER	11. EMAIL ADDRESS
	ATTORNEY ID	12. SIGNATURE

SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above	SIGNATURE of Authorized CCSO Deputy or Clerk	14. Date Filed	15. Expiration/Hearing Date
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16. I hereby CERTIFY and RETURN that: I have personally served, I have legal evidence of service as shown in "Remarks", I have served a person of suitable age and discretion residing in defendant's usual place of abode/office, I have served defendant's / plaintiff's attorney, has been served by law enforcement, I have executed the writ or complaint, as shown in "Remarks", on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., at the address inserted below by handing a TRUE and ATTESTED copy thereof.

17. I hereby certify and return a **NO SERVICE** because I am unable to locate the individual, company, corporation, etc., named above. (See Remarks)

18. Name and title of individual / attorney served:	19. Copies served / posted:
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20. Address of where served (complete only if different than shown above) (Street, Apartment Number, City, State, ZIP Code)	21. Date of Service	22. Time AM PM
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23. ATTEMPTS	Date	Time	AM PM	Date	Time	AM PM	Date	Time	AM PM	Date	Time	AM PM
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24. Advance Costs	25. Service Costs	26. Notary Cert.	27. Mileage/Postage/Poundage	28. Total Costs	29. COSTS DUE OR REFUND
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SHERIFF'S SALE AND/OR EVICTION SCHEDULED FOR: DATE: _____ TIME: _____ AM / PM

NOTICE TO REQUESTING PARTY: TO PROCEED WITH THE PERSONAL PROPERTY SALE AND/OR EVICTION, YOU MUST ADVISE THIS OFFICE OF YOUR INTENT TO PROCEED AT LEAST 24 HRS. PRIOR TO THE SALE DATE/TIME AND PROVIDE WRITTEN VERIFICATION OF YOUR INSTRUCTIONS.

30. REMARKS:	31. AFFIRMED and subscribed to before me this _____ day of _____ 20____ Notary Public _____
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SO ANSWERS	32. Signature of Dep. Sheriff	33. Date	34. Signature of Sheriff of Chester County <i>Carolyn B. Welch</i>	35. Date
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**DEPUTIZED SERVICE:
 PLEASE RETURN THIS FORM TO THE
 CHESTER COUNTY
 SHERIFF'S OFFICE**

Affix Barcode Here

SHERIFF - FORM # 15027 REV. 12/2015