

Eviction Agreement

To whom it may concern:

A copy of the eviction policy of the Office of the Sheriff - St. Lawrence County was provided to me. I have read and fully understand this policy.

I understand that I'm responsible for the physical removal of all personal property of the tenants from the residence. I understand I must place the property in a safe and secure place for a reasonable period of time, allowing the owner reasonable access to it. I understand the place I select to keep the property of the tenant must be completely separate from the premises of the eviction.

I understand that if I do not meet all of the requirements of the policy, the eviction will be canceled and will have to be rescheduled for a later date.

I hereby release the St. Lawrence county Sheriff, the Office of the Sheriff - St. Lawrence County, and the County of the St. Lawrence from all responsibility for the property removed pursuant to the warrant of eviction or other court mandate.

LANDLORD
SIGNATURE: _____

DATE: _____ TELEPHONE: _____

AGENT FOR THE
LANDLORD: _____

DATE: _____ TELEPHONE: _____