KENNEBEC COUNTY SHERIFF'S OFFICE

Ken Mason, Sheriff

CIVIL DIVISION

Harry McKenney, Chief

SERVICE REQUEST CHECK-LIST FORM

In order for us to attempt service, in accordance with Maine Revised Statute, Title 14 Section 702, we are requesting that you attach a retainer. Any unearned portion of your retainer will be refunded; any fees and costs exceeding that amount will be billed to you.

$120 for 1 Person or serve

- $140.00 if originating outside of the State of Maine

$165 for 2 people or serves

$200 for 3 people or serves

Please make your cashier's bank check or money order payable to: **Kennebec County Sheriff's Office**

No Personal checks, Credit or Debit card, or Cash will be accepted.

WHAT WE WILL NEED FROM YOU:

Please make sure you check off ALL items to indicate "YES" below:

- ☐ **Is the address for the person(s) to be served in Kennebec County?**
- ☐ Do you have one "**Original"** document for **each person** to be served?
- ☐ Do you have one "**Copy"** for **each person** to be served?
- ☐ Are all papers **completely** filled out, including dates and court information?
- ☐ Have you enclosed a Money Order or Cashier's Bank Check?
- ☐ Have you filled out the **Service Request Information** on the back of this form?

WHAT WE CANNOT DO FOR YOU:

Please remember that our role is to deliver your papers. We cannot give you legal advice or assist you in filling out your documents. We cannot advise you as to what is the best way to handle your situation. By accepting your documents to be served we are not expressing an opinion that they are filled out properly or are legally sufficient for your purpose.

If you are not an attorney, we recommend that you consult with one.

73 WINTHROP STREET AUGUSTA ME, 04330 TEL. (207) 626-4008

Created: 2014
Revised:11/7/2024

MINIMUM INFORMATION NEEDED TO HELP SAVE TIME AND EXPENSE:

PERSON(S) TO BE SERVED:

Name(s): _____

Home Street address: _____**City**_____

HOUSE / APARTMENT BUILDING / MOBILE HOME Circle One **Apt. #** _____ **Floor:** _____

Building numbered? YES / NO **Apt. numbered?** YES / NO **Entrance location: Front/Rear/Left/Right**

Is this a room being rented in the apartment? YES /NO **Color of building:** _____

***If the building is security locked, we will need a key/code. Code for entering building:** _____

Side of Street: LEFT / RIGHT **Is there someone else that would be home?** _____

Directions or Landmarks to location:

_____

Time of day person will most likely be home: DAYS / EVENINGS **Other:** _____

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Additional Information on the person(s) to be served:

Home phone: _____ Cell phone: _____ Work phone: _____

Name of employer and address: _____

Work schedule: _____ Work hours: _____

Approx. Age: _____ Height: _____ Weight: _____ Hair Color: _____

Vehicle(s): _____ Any dogs known to be aggressive or bite? YES /NO

Any known firearms on the premises? YES / NO Where are they kept? _____

Is there anything else the serving officer should be aware of about the person being served?

_____

YOUR INFORMATION:

Person or Business Requesting Service:

Name: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Home or Cell Phone: _____ **Driver's License ID Number:** _____

HOW TO RETURN YOUR PAPERWORK TO YOU (CHECK ONE)

☐ **Please CALL ME FOR PICKUP.** My phone number is listed above. I will pick up at 73 Winthrop Street, Augusta on business days between the hours of 8 am and 4 pm.

☐ **Please MAIL** the paperwork back to the address listed above. *I understand that the Sheriff's Office can NOT track this paperwork once placed in the mail.*

Office Use Only:

Date Received Paperwork: _____

Paid By: Check/Money Order: _____

Amount: _____