



NORFOLK SHERIFF'S OFFICE

ASSET SEARCH REQUEST FORM

To request an asset search please submit this form along with your original execution on money judgment. Please provide as much of the following information as you are able. While we do not require all of the following, the more information you can provide the more effective the asset search may be. Please use the additional information section to provide any other information you believe may be of assistance.

PLAINTIFF INFORMATION

Name _____
Street _____ City/Town _____ Zip _____
Phone (REQUIRED) _____ Cell: _____
Email _____

DEFENDANT INFORMATION

Last Name _____ First Name _____ M.I. _____
Date of Birth _____ SSN# _____

Defendant Contact Information

Street _____ City/Town _____ Zip _____
Phone _____ Cell: _____ Email: _____

Alternate Addresses

Street _____ City/Town _____ Zip _____
Street _____ City/Town _____ Zip _____

Employment

Company Name _____
Street _____ City/Town _____ Zip _____
Phone _____

Vehicle(s)

Make _____ Model _____ Year _____ Reg# _____ Color _____
Make _____ Model _____ Year _____ Reg# _____ Color _____

BALANCE OWED _____

Additional Information

PLEASE MAIL THIS FORM ALONG WITH YOUR ORIGINAL EXECUTION ON MONEY JUDGMENT TO P.O. BOX 699245 QUINCY, MA 02269. ALTERNATIVELY YOU MAY DROP OFF THE SERVICE AT OUR OFFICE AT 181 PARKINGWAY QUINCY MA. FOR QUESTIONS PLEASE CALL 781-326-1787