

## **Acknowledgement of Receipt of Eviction Policy**

I, the Landlord / Agent / Attorney, acknowledge that the above-listed Clinton County Sheriff's Department Civil Office has given me a copy of its eviction policy, which explains the agency's policy regarding evictions. **I also understand, if the eviction is cancelled for any reason I will NOT receive a partial refund of service fees paid.**

Name (print): \_\_\_\_\_

Name Sign: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Date-of-birth: \_\_\_\_\_