



## SERVICE REQUEST CHECK LIST FORM

In order for us to attempt service, in accordance with the Maine Revised Statute, Title 14 Section 702:

### WHAT WE WILL NEED FROM YOU

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

- Do you have one "Original" document for each person(s) to be served?
- Do you have one "Copy" for each person(s) to be served?
- Are all papers "Completely" filled out, including dates and court information?
- Is the address for the person(s) to be served in "Androscoggin County"?
- 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 serve your paper. 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 particular situation. By accepting your documents to be served we are not expressing an opinion that they are filled out properly or will be legally sufficient for your purpose.

PLEASE FILL-OUT OTHER SIDE -----}

Civil Office hours are Monday thru Friday 8:30 am to 4:00 pm. You may call or walk-in without an appointment. Once service is made, we will complete the Proof-of Service on your original(s) and mail it back to you. If you are not an attorney we recommend that you consult with one.



# ANDROSCOGGIN COUNTY SHERIFF'S OFFICE

2 TURNER ST. UNIT 9  
AUBURN, ME 04210  
207-753-2500

**ERIC G. SAMSON**  
SHERIFF

**WILLIAM GAGNE**  
CHIEF DEPUTY

### 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. # \_\_\_\_\_ What floor: \_\_\_\_\_

Building numbered? Yes / No Apartment numbered? Yes / No Other Info: \_\_\_\_\_

Entrance location: Front / Rear / Left / Right \*If the building is security locked, we will need a key.

Color of Building: \_\_\_\_\_ Side of Street: Left / Right \_\_\_\_\_

Directions or Landmarks to location if not an in-town street address: \_\_\_\_\_

\_\_\_\_\_

Time of day or evening person will most likely be home: Day / Evenings Other: \_\_\_\_\_

Does the person work and is there someone else that would be home? \_\_\_\_\_

\*\*\*\*\*

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

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Name of employer and address: \_\_\_\_\_

Work schedule: (circle work days): S M T W T F S Work Hours: \_\_\_\_\_

Birth date: \_\_\_/\_\_\_/\_\_\_ Height: \_\_\_' \_\_\_" Weight: \_\_\_ Hair color: \_\_\_ Eye Color: \_\_\_

Vehicle(s): \_\_\_\_\_ Any dogs known to be aggressive or bite? \_\_\_\_\_

Any known firearms on the premises? \_\_\_\_\_ Where are they kept? \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

#### Your Information: (for Return-of-Service to be mailed back to you)

Person or Business Requesting Service:

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

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home/Cell phone: \_\_\_\_\_ Work/Office Phone: \_\_\_\_\_ Email: \_\_\_\_\_



**ANDROSCOGGIN COUNTY  
SHERIFF'S OFFICE**

2 TURNER ST. UNIT 9  
AUBURN, ME 04210  
207-753-2500

**ERIC G. SAMSON**  
SHERIFF

**WILLIAM GAGNE**  
CHIEF DEPUTY

Service Payment

<u>Town</u>	<u>1 Paper</u>	<u>Out of state papers</u>
Auburn	\$28.00	1 <sup>st</sup> is \$60.00 and \$30.00 per additional
Durham	\$30.50	
Greene	\$29.00	
Leeds	\$34.50	
Lewiston	\$29.00	
Lisbon	\$29.00	
Lisbon Falls	\$30.50	
Livermore	\$37.50	
Livermore Falls	\$39.50	
Mechanic Falls	\$30.00	
Minot	\$29.50	
Poland	\$30.50	
Sabattus	\$28.50	
Turner	\$31.00	
Wales	\$32.00	

\*\*\* \$21.00 per additional paper. Additional mileage fees may apply. Make checks and money orders payable to **Androscoggin County Treasurers Office**