



# Service Request form

**Mail to:**  
Direct Process Server LLC  
22 Southern Blvd Suite 103  
Nesconset, N.Y. 11767  
Email to: Info@DirectProcess.com  
Fax to: 631-610-1987

Current Date

Company Name: \_\_\_\_\_ Ph #: \_\_\_\_\_

Requested by: \_\_\_\_\_ Fax #: \_\_\_\_\_

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

Email: \_\_\_\_\_

### **TYPE OF SERVICES REQUESTED**

Court: \_\_\_\_\_ Case#: \_\_\_\_\_

PROCESS SERVICE  Rush Service  Routine Service  Specific date for service: \_\_\_\_\_

Additional service instructions: \_\_\_\_\_

Documents to be served or filed: \_\_\_\_\_

COURT FILING instructions: \_\_\_\_\_

COURT RESEARCH instructions: \_\_\_\_\_

Special instructions: \_\_\_\_\_

### **DEFENDANT ADDRESS (PARTY TO BE SERVED)**

### **ALTERNATIVE ADDRESS**

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

Business: \_\_\_\_\_

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

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

City & Zip: \_\_\_\_\_

City & Zip: \_\_\_\_\_

Ph#: \_\_\_\_\_

Ph#: \_\_\_\_\_

Additional info: \_\_\_\_\_

Additional info: \_\_\_\_\_

### **Defendant Description**

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ CDL: \_\_\_\_\_ Marital Status: (S) (M) (D)

Physical Description: Ht: \_\_\_\_\_ Wt: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_ M/F: \_\_\_\_\_ Race: \_\_\_\_\_

Vehicle Info: Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Lic#: \_\_\_\_\_

Other/ Misc. Information \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_