

**O'BRIEN REDMOND
SOLICITORS**

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INSTRUCTION SHEET FOR DEBT RECOVERY

CLIENT DETAILS

Full Name: _____

Address: _____

Registered Office: (if different)

Telephone no. _____

Fax no. _____

Email _____

DEBTOR DETAILS

Name (Insert full registered title for Limited Company or Christian Name and Surname for others):

Trading Name: (if different)

Trade Address: _____

Registered Office (if Limited Company):

Description:
(Occupation if not a Limited Liability Company).

Phone No: _____

Fax No: _____

DETAILS OF DEBT

Amount Due: _____

Dates when goods or services were provided:

Nature of Debt (e.g. goods supplied, services rendered, bounced cheque etc.):

Is there a dispute relating to this Debt? (if so, furnish details):

Please send us detailed Statement of Account:

If Debt is on foot of a written agreement please send copy:

If there is a personal guarantee please send copy:

INSTRUCTIONS

Issue 7 day warning letter:

Issue Writ if no response:

Other:

Date: _____

Signed: _____