Tenancy Services



Application for Contact Information

To assist with enforcing Tenancy Tribunal Orders

Please read the important information on the back of this form.

Information about you

First name(s):				Fa	mily name:			
Company / Trust:								
Street address								
Street number:		Street name:						
Suburb / Town:								
City / District:							Postcode:	
Postal address	(if different from a	bove)						
Street number:		Street name:						
or PO Box numbe	er / Private bag:			Suburb / Town:				
City / District:							Postcode:	
Contact details								
Mobile:			Work	:		Fax:		
Email:								
	I am happy	to be contacte	ed by en	nail about my requ	iest (including	g notifying	me on the ou	tcome).
l was the:	landlord [tenant	agent					

I enclose a copy of the Tenancy Tribunal Order

Please note: if the Order was by way of mediation, it must be officially sealed by the Tenancy Tribunal before enforcement action can be taken. If you do not have a copy of your Order, you should contact the Court at which the Order was sealed. If your Order has not been officially sealed, you should contact the Ministry of Business, Innovation & Employment on 0800 TENANCY (0800 836 262).





Application for Contact Information

Information about the debtor

Debtor's First name(s):	Surname:										
Also known as:											
Last known address:											
Date you believe the debtor last lived at the address: / / /											
Additional debtor deta	ils										
Pate of birth:											
Tenancy bond number:	(if a bond was lodged)										
Work and Income custo	mer number: (if applicable)										
Any information that is	likely to assist a search for contact information:										
Contact details											
Mobile:	Work: Fax:										
Email:											
	I am happy to be contacted by email about my request (including notifying me on the outcome).										
I have enclosed a co driver's licence or pa	py of the debtor's signature (eg. a copy of the tenancy agreement or a copy of the debtor's assport).										
Information abou	it what action you have already taken										
Have you made an appli	cation to the Court to have the Order enforced? 🗌 Yes 🗌 No										
If yes, what is the Court	Enforcement number?										
Have you tried to collect If yes, please specify:	t the debt in any other way? (e.g. through a debt collection agency or some other way) Yes No										
· · · · · · · · · · · · · · · · · · ·											
	you taken to find contact information about the debtor? (e.g. search the telephone directory, electoral roll, or other forms of publicly available information):										



Application for Contact Information

Important Information

Please ensure all details on the form are accurate.

If contact information is located and can be released, the information will be forwarded to the appropriate District Court. You will receive a letter from Tenancy Services advising you what will happen next.

If your request is unsuccessful, you will receive a letter advising you that your request has been unsuccessful and the reasons why.

Please return completed form, a copy of the Order, and any additional information to **Tenancy.ACl@mbie.govt.nz** or post to The Compliance Unit, Tenancy Services (ACI), PO Box 50394, Porirua 5240.

For enquiries about the Application for Contact Information process, please call **0800 836 262**, or email **Tenancy.ACl@mbie.govt.nz**

I am requesting information about another person for the sole purpose of commencing and/or assisting with the enforcement of a Tenancy Tribunal Order. I agree to this information being released to the Ministry of Justice only. I accept that this information will be held by the Court and I will not request access to it.

The information I have provided on this form is true and correct to the best of my knowledge.

Signed:	Date:	/	/	