



PROCESS REQUEST FORM

To: Beehive Attorney Service, LLC 5258 S. Pinemont Dr., Suite 210 Murray, UT 84123 (800) 779-0379 Attn: Wendy Stowers	From:
Date:	Tel No.:
Court:	Attn:
Plaintiff:	Case No:
Defendant:	Sender's Ref. No:
<input type="checkbox"/> DO TODAY <input type="checkbox"/> RUSH <input type="checkbox"/> ROUTINE <input type="checkbox"/> LAST DAY TO SERVE: _____	
PLEASE: <input type="checkbox"/> Serve <input type="checkbox"/> File <input type="checkbox"/> Serve then File <input type="checkbox"/> File then Serve <input type="checkbox"/> Issue then Serve	
DOCUMENTS:	
SERVE:	
RESIDENCE ADDRESS:	BUSINESS ADDRESS:
Phone No.:	Phone No.:
DESCRIPTION:	Age: Sex: Race: Hgt: Wgt. Hair Color:
IMPORTANT! SERVICE MUST BE MADE IN THE MANNER CHECKED BELOW:	
<input type="checkbox"/> PERSONAL SERVICE: By personally delivering copies to the person being served.	
<input type="checkbox"/> SUBSTITUTED SERVICE AT RESIDENCE: By personally delivering copies to the dwelling house or usual place of abode of the person (or authorized person on behalf of an entity) being served. Person receiving documents must be at least ____ years of age and should be informed of the general nature of the documents. If the documents are served in this manner, you should/ should not mail copies of same to the address where the papers were left. For additional requirements. If any, see below. May sub on ____ attempt.	
<input type="checkbox"/> SUBSTITUTED SERVICE AT BUSINESS: By personally delivering copies to the office or place of business of the person (or authorized person) on behalf of an entity) being served. Person receiving documents must be at least ____ years of age and should be informed of the general nature of the documents. If the documents are served in this manner, you should/ should not mail copies of same to the address where the papers were left. For additional requirements, if any, see below. May sub on ____ attempt.	
<input type="checkbox"/> POSTING: By posting copies in a conspicuous manner to the address of the person/entity being served. If the documents are served in this manner, you should/ should not mail copies of same to the address where the papers were left. For additional requirements, if any, see below. May post on ____ attempt.	
<input type="checkbox"/> NOTARIZED AFFIDAVIT	FILING FEE ATTACHED: \$ _____
<input type="checkbox"/> USE OUR PROOF OF SERVICE (enclosed)	WITNESS FEE ATTACHED: \$ _____
<input type="checkbox"/> RETURN PROOF BY OVERNIGHT DELIVERY (account number below)	ADVANCE DEPOSIT ATTACHED: \$ _____
SPECIAL INSTRUCTIONS:	
Total fees for services rendered should not exceed \$_____ without advance authorization.	