



REQUEST FOR INVESTIGATION

CLIENT

Name _____ Social Security Number _____

Street Address _____ City, State _____ ZIP Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

Employer _____

SUBJECT

Name _____

Date of Birth _____ Social Security Number _____

Street Address _____ City, State _____ ZIP Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

Height _____ Weight _____ Hair Color _____ Eyes _____ R/S _____

Dist. Char. _____ S/M/T _____

Vehicle Make _____ Model _____ Color _____ License Plate _____

Investigation Desired (Client Description) _____

Needed: Photos ____ Video ____ Interviews ____ Background ____ Locate ____ Source ____
 Surveillance ____ Statement ____ Assessment ____ Witness Recommendation ____

FEES/AGREEMENT

Investigative rate for Field Surveillance is \$125.00 per hour, \$0.72 per mile plus incidental expenses at actual cost. Investigative rate for Field Surveillance for a second investigator is \$95.00 per hour, third and subsequent investigators \$85.00 per hour. Investigative rate for a Tracker and/or Camera is \$110.00 per day. Investigative rate as a subcontractor is \$105.00 per hour, \$0.72 per mile plus incidental expenses at actual cost. A five percent (5%) administrative fee is added to cover office expenses. I hereby agree to be responsible for all investigative fees, costs of collection of unpaid account and interest at highest lawful rate for accounts over thirty (30) days past due. I hereby deposit a retainer of \$_____ for the initial investigation phase.

Please charge my credit/debit card number:

CC Number: _____ Expiration Date: _____ CVV: _____

Date _____ Time _____

Client Signature _____ Client Printed Name _____