



### CLIENT INTAKE FORM

**Initial Consultation with a Licensed Investigator (half hour) FREE.\***

**\*Any additional time will be charged based on our hourly fees of \$95.00.**

Before we accept any investigation, it is essential that you be interviewed by one of our Licensed Investigators to determine the special needs of your case and provide you with a realistic idea of the services that we can provide. The investigator will also estimate the projected expense of your investigation and the amount of time it will take with most cases. However, every case is handle based upon the information provided.

Your First Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_

ZIP Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

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

Have you ever hired a private Investigator in the past? \_\_\_\_\_

If yes, was it regarding this case? \_\_\_\_\_

Did the investigation cease? \_\_\_\_\_

Do you have a restraining order against you? \_\_\_\_\_

Do you own or carry any weapons? \_\_\_\_\_

If yes what type? \_\_\_\_\_



What type of investigation do you want?

- |   |   |
|---|---|
| <input type="checkbox"/> Background       | <input type="checkbox"/> Witnesses      |
| <input type="checkbox"/> Infidelity       | <input type="checkbox"/> Missing Person |
| <input type="checkbox"/> Personal Records | <input type="checkbox"/> Skip Trace     |
| <input type="checkbox"/> Other            | <input type="checkbox"/> Surveillance   |

### **Matrimonial/ Infidelity**

Surveillance to be conducted on:

- |                    |              |
|--------------------|--------------|
| ? Husband          | ? Wife       |
| ? Boyfriend        | ? Girlfriend |
| ? Teenager / Child |              |
| ? Other            |              |
- 

Which signs do you see:

- |                                 |   |
|---------------------------------|---|
| ? Working a lot of overtime     | ? Hiding the phone/cell bill            |
| ? Excessive use of the internet | ? Personal purchase of an extra cell ph |
| ? Additional mileage on the car | ? No longer interested in sex           |
| ? Hanging out with new friends  | ? No longer wearing a wedding band      |
| ? Smells of perfume or alcohol  | ? Saying "I need space"                 |

Please Explain:(Note: the person being named is "The Subject.")



Number of Years Together: \_\_\_\_\_

Number of Children: \_\_\_\_\_

Subject's type of employment: \_\_\_\_\_

Does the subject have a criminal record? \_\_\_\_\_

Does subject own or carry any weapons? \_\_\_\_\_

If yes what type? \_\_\_\_\_

Possible suspect's information:(Note: Suspect is the person that the subject is having an affair with.)

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Briefly, tell us your story:

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If we provide the proof you need, will you:

- ☐ Leave them and get a divorce
- ☐ Go for therapy together

- ☐ Separate
- ☐ I do not know, "I will need help"

Best Time to Call:

Best Phone Number to Call:

Alternate Phone Number to Call:



What is your investigation budget to obtain the information that you are requesting?

- |   |  |
|---|--|
| <input type="checkbox"/> \$500 - \$750  | <input type="checkbox"/> \$1501 - \$5000 |
| <input type="checkbox"/> \$751 - \$1500 | <input type="checkbox"/> \$5001 and up   |

Where did you hear about us?

- |   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Google                             | <input type="checkbox"/> Television  |
| <input type="checkbox"/> Referral from a friend or attorney | <input type="checkbox"/> Radio       |
| <input type="checkbox"/> Newspaper/ Magazine/Mailing        | <input type="checkbox"/> Other _____ |

What method did you use to find us?

- |                                  |                                   |
|----------------------------------|-----------------------------------|
| <input type="checkbox"/> Desktop | <input type="checkbox"/> Phone    |
| <input type="checkbox"/> Laptop  | <input type="checkbox"/> Referral |



I have read all the above and filled out all the information to the best of my knowledge. I the undersigned also promise not to use any information obtained by Premier Covert Investigations, L.L.C. in any way that would be considered unlawful in the state of Florida.

Signature: FULL Name: \_\_\_\_\_

Date: \_\_\_\_\_

Please DO NOT SUBMIT if you DO NOT WANT A CALL BACK. The Director only speaks with select individuals who are seriously in need of our help and need to hire an investigator.