



# PRIVATE INVESTIGATION CLIENT INTAKE FORM

**CONFIDENTIAL - FOR INTERNAL USE ONLY**

## **SECTION 1: CLIENT INFORMATION CONTACT DETAILS**

Full Name:

\_\_\_\_\_

Date of Birth:

\_\_\_\_\_

Phone Number(s):

\_\_\_\_\_

Email Address:

\_\_\_\_\_

Preferred Contact Method: ☐ Phone ☐ Email ☐ Text  
Address:

\_\_\_\_\_

Occupation / Employer:

\_\_\_\_\_

## **CASE INTRODUCTION**

Relationship to Subject:

\_\_\_\_\_

Reason for Inquiry:

\_\_\_\_\_

How did you hear about our services?

\_\_\_\_\_

## **SECTION 2: CASE INFORMATION**

### **INVESTIGATION TYPE**

Type of Investigation Requested (check all that apply):

Surveillance

Person / Locate

Infidelity / Domestic

Fraud / Financial

Background Check

Missing Person

Civil or Legal Matter

Other

Objective of Investigation: (Please clearly state the desired outcome or goal of the investigation)

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### **SECTION 3: SUBJECT INFORMATION IDENTIFYING DETAILS**

Full Name:

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Aliases / Nicknames:

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Date of Birth / Approx. Age:

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Gender:

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Relationship to Client:

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## **CONTACT & LOCATION INFORMATION**

Address(es):

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Phone Number(s):

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Email Address(es):

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Known Addresses or Frequent Locations:

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## **PHYSICAL DESCRIPTION**

Height / Weight:

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Hair / Eye Colour: \_\_\_\_\_

Tattoos / Scars / Marks:

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Distinguishing Features:

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## **EMPLOYMENT & HABITS**

Employment / Occupation:

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Usual Schedule / Habits:

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Distinguishing Habits or Mannerisms:

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## **VEHICLE INFORMATION**

Make / Model / Colour / Year:

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License Plate Number / Jurisdiction:

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Province / State of Registration:

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Registered Owner Name (if known):

Common Parking Locations / Storage:

**SECTION 4: BACKGROUND & CONTEXT**

**SITUATION DETAILS**

Describe the Situation:(Provide a detailed chronological context leading up to the investigation request)

**PREVIOUS INVOLVEMENT & RISK**

Has any other investigator or law enforcement been involved? Yes      No      If yes, details:

Are there any ongoing legal proceedings? Yes      No      If yes, specify:

Is there a history of violence, criminal activity, or mental health concerns involving the subject?    Yes      No

If yes, describe:

**SECTION 5: ADDITIONAL DETAILSASSOCIATES, FINANCIALS, & DIGITAL PRESENCE**

Known Associates / Family Members / Affiliations:

Social Media Accounts (Facebook, X, Instagram, LinkedIn, etc.):

Digital Presence (websites, online businesses, dating profiles, etc.):

Known Financial or Business Interests / Property Owned:

Travel Habits / Out-of-Town Contacts:

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**SECTION 6: AUTHORIZATION & CONFIRMATION**

By signing below, you acknowledge that the information provided is true and accurate to the best of your knowledge, and that you are requesting investigative services in compliance with applicable laws. This includes the *Private Security and Investigative Services Act*, 2005 where applicable<sup>1</sup>.

Client Name (Printed): \_\_\_\_\_

Client Signature: \_\_\_\_\_

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

Investigator (Receiving Form): \_\_\_\_\_

Investigator Signature: \_\_\_\_\_

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