

Hover View Investigations

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Client Intake Form

Full Name:		Date:		
Address:	City/ZIP:			
Phone:	Cell:	Email:		
D.O.B:/	Drivers License #:	SSN:		
Before we accept any Investigators to determ services that we are abl	on with a Licensed Investigation, it is essential that you ine the special needs of your case are to provide. If we accept your case, stigator will also estimate the project	u be interviewed by nd provide you with a the consultation fee wi	realistic idea of the	
Database Researd	ch & People Locator(per sea	rch)	\$295.00	
Using the exclusive res address, or social secur address, past addresses,	ources of H.V. Investigations, we can ity number (only first five #). This in and the names of other persons assoc H.V. Investigations has the right to re-	n compile a computer proformation will usually trated with that person,	include the person's their address or their	

Read Carefully

This form is a part of the contract that will be signed. If any part of this form is filled out incorrectly or with known false/fraudulent information, the contract is null and void, and you will lose a part or all of the retainer money.

Have you ever nired	a private Investigator	r in the past? _			
If yes, was it regarding	ng this case?				
Why did the investig	ation cease?				
Primary Subject's I	<u>Information</u>				
Full_Name:			D.O.B:	/	/_
Street Address:		City/Z	ip:	S	tate:
Home					
Phone #:	Mobile:		S.S.N:	/	/
Relationship to Subje	ect:	Driv	vers License:		
Vehicle License & D	escription:				
Subject's:					
Gender: Race	e:Age:	Height:	Weight:	Ha	ir:
	fying Marks or Tatto				
Eyes:Identi	fying Marks or Tatto	os:			
Eyes:Identi	fying Marks or Tatto e a criminal record?	os:			
Eyes:Identi Does the subject have Does subject own or	fying Marks or Tatto e a criminal record?_ carry any weapons?_	os:			
Eyes:Identi Does the subject have Does subject own or	fying Marks or Tatto e a criminal record?	os:			
Does the subject have Does subject own or If yes what type?	fying Marks or Tatto e a criminal record? _ carry any weapons?	os:			
Eyes:Identi Does the subject have Does subject own or If yes what type?	fying Marks or Tatto e a criminal record? _ carry any weapons?	os:			
Eyes:Identi Does the subject have Does subject own or If yes what type? Secondary Subject'	fying Marks or Tatto e a criminal record? _ carry any weapons? s Information	os:			
Eyes:Identi Does the subject have Does subject own or If yes what type? Secondary Subject? Full_Name:	fying Marks or Tatto e a criminal record? carry any weapons? s Information	os:	D.O.B:		
Eyes:Identi Does the subject have Does subject own or If yes what type? Secondary Subject' Full_Name: Street Address:	fying Marks or Tatto e a criminal record? _ carry any weapons? s Information	os:	D.O.B:		
Eyes:Identi Does the subject have Does subject own or If yes what type? Secondary Subject? Full_Name: Street Address: Home	fying Marks or Tatto e a criminal record? carry any weapons? s Information	os:City/Z	D.O.B:	/	/_ dtate:_
Eyes:Identi Does the subject have Does subject own or If yes what type? Secondary Subject's Full_Name: Street Address: Home Phone #:	fying Marks or Tatto e a criminal record? _ carry any weapons? s Information Mobile:	os:City/Z	D.O.B: 	/S	/_ dtate:_ //
Eyes:Identi Does the subject have Does subject own or If yes what type? Secondary Subject's Full_Name: Street Address: Home Phone #: Relationship to Subject	fying Marks or Tatto e a criminal record? _ carry any weapons? s Information Mobile:_ ect:_	os:City/Z	D.O.B: 	/S	/_ dtate:_ //
Eyes:Identi Does the subject have Does subject own or If yes what type? Secondary Subject's Full_Name: Street Address: Home Phone #:_ Relationship to Subject Vehicle License & D	fying Marks or Tatto e a criminal record? _ carry any weapons? s Information Mobile:	os:City/Z	D.O.B: 	/S	/_ dtate:_ //
Eyes:Identi Does the subject have Does subject own or If yes what type? Secondary Subject's Full_Name: Street Address: Home Phone #: Relationship to Subject's Vehicle License & D Subject's:	fying Marks or Tatto e a criminal record? _ carry any weapons? s Information Mobile:_ ect: escription:	os:City/Z	D.O.B: iip: S.S.N: vers License:	/S	//tate://
Eyes:Identi Does the subject have Does subject own or If yes what type? Secondary Subject's Full_Name: Street Address: Home Phone #: Relationship to Subject's: Vehicle License & D Subject's: Gender:Race	fying Marks or Tatto e a criminal record? _ carry any weapons? s Information Mobile:_ ect:_	os:City/ZDriv	D.O.B:	/S /Ha	//tate://

I hird Subject's I	<u>information</u>			
Full_Name:			D.O.B:	//
Street Address:		City/Z		
Home				
Phone #:	Mobile:		S.S.N:	//
Phone #:Mobil Relationship to Subject:		Driv		
Vehicle License &	Description:			
Subject's:	-			
Gender:R	ace:Age:	Height:	Weight:	Hair:
Eyes:Ide	entifying Marks or Tatt	toos:	_	
•	or carry any weapons'			
rourth Subject s	Inioi mation			
Full Name:			D.O.B:	/ /
Street Address:		City/Z	 Zip:	State:
Home				
Phone #:	Mobile:		S.S.N:	//
Relationship to Su	Mobile:	Driv	vers License:	
Vehicle License &	Description:			
Subject's:				
Gender:R	ace:Age:	Height:	Weight:	Hair:
Eyes:Ide	ntifying Marks or Tatt	toos:		
Does subject own	nave a criminal record? or carry any weapons	?		
my knowledge. obtained by Ho	of the above and f I the undersigned ver View Investiga state of California.	l also promise ations in any v	e not to use a	any informati

Signature:______Date:_____

Investigation Typ	<u></u>	Interview/Statemen	ts <u>Obtain</u>	
() Asset Search		() Employee	O WCAI	B Records
() Background		() Co-Workers	~	nel Records
() Criminal		() Witnesses	() Wage	
() Missing Person		() Employer		al Records
() Personal Injury		() Supervisor	· · · · · · · · · · · · · · · · · · ·	al Authorization
() Process Service		() Doctors(s)	· ·	eal Evidence
() Skip Trace		() Third Party(s)	() Police	
() Surveillance		() Police Reports		Certificate
() Undercover		() Polygraph	· ·	Certificate
() Other		() Other	V	
Case Outline:				
Estimated Costs:				
+QM Hours	+@395_	+FA Hours	+@250_	+Research_
+Documents	+Court	+Report	+Mileage	+@\$.69
=Total_				
Goals:				
1				
2				
J				
4				
5				

CASE NOTES