

SOUTH DISTRICT INVESTIGATIONS



State License PI26535

-CONFIDENTIAL-

REQUEST FOR INVESTIGATION

OFFICE USE ONLY

Date Rec'd: _____

Case No: _____

Type Code: CIV CRI FAM BKG

NOTICE: This form is an initial request and not a binding agreement between South District Investigations and the requestor. This is a preliminary request form only. An investigator will contact you once this request is received. Please complete as much information as possible. This will assure a more thorough investigation.

A. REQUESTER (YOU)

NAME (Last, First Middle)		Phone	
Address (Number, Street, Apt/Suite)	City	State	ZIP
Phone	Email		

B. REFERENCE CASES (IF APPLICABLE)

Claim Number	Police Case	DA Case	Court Case	Other
Agency/Co	Agency	County	County	Other

C. REASON FOR INVESTIGATION (REQUIRED)

<input type="checkbox"/> Continued on page 2 (Section G)

D. SUBJECT INFORMATION (INVOLVED PERSON)

NAME (Last, First Middle)		Date of Birth (if known)		Social Security (if known)	
Alias/Nicknames/Maiden Name		Driver License State		Occupation	
Home Address (Number, Street, Apt/Suite)		City		State	ZIP Code
Work Address (Number, Street, Suite/Bldg)		City		State	ZIP Code
Phone 1		<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work	Phone 2		<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
Sex	Height	Weight	Hair Color	Eye Color	Other (tattoos, disabilities, etc.)
Married/Significant Other? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		Has Children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		Represented by Attorney? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk	
Military Background? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		Owns Firearms? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		Criminal Record? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk	
Do you have a restraining order on this person? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is this person a Law Enforcement Officer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk					
Known activities (golf, hiking, car shows, etc.)					

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