

CONFIDENTIAL



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INVESTIGATION ORDER FORM

FAX THIS COMPLETED FORM TO (801) 222-0980

CLIENT INFORMATION

Company Name _____ Contact Person _____

E-mail Address _____ Telephone / Ext _____ Fax Number _____

Street Address _____ City _____ State _____ Zip _____

Attorney Information _____ Attorney Phone Number _____ Desired Completion Date _____

SUBJECT / CASE INFORMATION

Full Name _____ Employer _____ Occupation / Position _____

Home Address _____ City _____ State _____ Zip _____

Home Phone Number _____ SSN _____ Date of Birth _____

Height _____ Weight _____ Hair Color _____ Eye Color _____ Marital Status _____

Identifying Features _____

Describe suspicions regarding Subject / Case: _____

What are the prime directives for this investigation? _____

Are there any special notes or directions regarding this matter? (Include info. on who should be contacted and how, to insure confidentiality.) _____

Authorized Investigative Hours / Budget: _____

Authorizing Signature

Date

You may order your next investigation online at www.tinsleypi.com
P.O. BOX 1884 OREM, UTAH 84059 * PHONE 1-888-652-9700