

SURVEILLANCE REQUEST

Client Information

(form considered private when completed)

Client Name:

Internal

phone, email	Category:
priority critain	File Manager:
Address:	Budget:
for accounting	
Subject	Information
Name & aliases:	
Date of birth or age:	
Physical description:	
include photos if available	
Residential address:	
Residential address:	
Vehicle:	
Familia in Ca	
Family info.: married, children	
married, emidren	
Employment info.:	
Social media:	
Facebook, Instagram	
Known appointments:	
upcoming events	
Additional info: habits,	
sports, gym, cottage, etc.	
A4: 11	
Miscellaneous:	
<u> </u>	



Investigative Request - Surveillance

O	hi	ective
v	vj	CCLIVE

- For what purpose is the information being requested: workplace matter, court proceedings, safety concern etc.?
- What information is being requested? Include preference for date and times of surveillance/investigation to assist in planning.

*Note: If a sched	luled surveillance	is canceled l	ess than 24	hours prior to	scheduled	start, a 2	hour
preparation fee n	nay be charged.	**Note: if a r	eport of our	findings is requ	uired, a 1 h	our/\$85 a	administrative
fee per day of su	rveillance is billed	d.					

Payment Information

The following are payment /retainer options. If alternative methods are preferred, please discuss with your file manager.

- Interac Email Transfer to info@sevittiinvestigations.ca,
- Credit card include card number, name on card, Postal code, expiry and CV on back of card,
- Using PayPal link https://www.paypal.com/paypalme/sevittiinvestigation,
- By cash, certified cheque or money order to our office at 8 King Street West, suite 101, Stoney Creek, ON, L8G 1G8.