



ALL ONTARIO INTELLIGENCE & INVESTIGATION

CONFIDENTIAL — LICENSED PRIVATE INVESTIGATION AGENCY #30000594 - ONTARIO PSISA 2005

CLIENT INVESTIGATION INITIATION & RETAINER REQUEST FORM

Confidential consultation. Formal written agreement required per PSISA before work commences.

AGENCY CONTACT

Agency: All Ontario Intelligence & Investigation | Licence #: 30000594
Address: Greater Sudbury, Ontario | Serving All Ontario
Phone: (705) 920-4222
Email: info@allontariointelligence.com
Website: www.allontariointelligence.com

1. CLIENT IDENTIFICATION (Required under O.Reg 366/07)

Full Legal Name:

Date of Birth (YYYY-MM-DD):

Government ID Type:

ID Number (last 4 digits only):

Full Address:

City:

Province / Postal Code:

Phone:

Alternate Phone:

Client Email:

Preferred Contact Method (Phone / Email):

Safe Contact Time:

How did you hear about us?:

2. NATURE OF INVESTIGATION & LAWFUL PURPOSE

Type of Investigation (check all that apply):

- ☐ Infidelity / Domestic | Child Custody / Family Law Support | Background Check | Corporate / Due Diligence
☐ Fraud / Theft / Internal | Missing Person / Locate | Surveillance | Insurance / WSIB
☐ Online Harassment / Cyber | Other: _____

Describe the situation and your objective (be specific):

Lawful / Justifiable Purpose Declaration:

Required Declarations (must check all):

- ☐ I confirm this request is for a lawful purpose and not for harassment, intimidation, voyeurism, or any unlawful activity
- ☐ I understand investigators must operate within Criminal Code, PIPEDA, Trespass to Property Act
- ☐ Subject is not a protected person under court order where such investigation is prohibited

3. SUBJECT(S) OF INVESTIGATION

Full Name / Alias:

DOB / Approx Age:

Address:

Workplace / School:

Vehicle Description:

Licence Plate:

Phone / Email / Social Media:

Relationship to Client:

Physical Description:

Photo Available?

☐ Yes ☐ No

4. CASE DETAILS & KNOWN INFORMATION

Relevant Dates / Times / Schedule:

Locations of Interest:

Existing Evidence / Documents:

Previous Investigative Attempts:

Urgency: ☐ Low ☐ Standard ☐ Urgent ☐ Time-Sensitive

Desired Outcome: ☐ Report ☐ Photo/Video ☐ Court-Ready Statement

5. AUTHORIZATION, PRIVACY & CONSENT (PIPEDA)

I authorize All Ontario Intelligence & Investigation to collect, use, and disclose personal information reasonably necessary for the investigation, including OSINT.

- ☐ I consent to collection and understand file retained per PSISA (2 years minimum)
- ☐ I authorize OSINT, database checks permitted by law, surveillance in public places only

Legal Counsel (if applicable) - Name / Firm / Contact:

6. FEE STRUCTURE ACKNOWLEDGMENT (Per PSISA - no contingency fees)

Investigations are billed hourly plus expenses. No guarantee of outcome. Contingency fees prohibited. Separate Written Service Agreement and retainer required.

Estimated Budget Range (check one):

- ☐ < \$1,500 ☐ \$1,500 - \$3,000 ☐ \$3,000 - \$5,000
- ☐ \$5,000 - \$7,500 ☐ \$7,500 - \$10,000 ☐ \$10,000+ ☐ To Be Discussed

- ☐ I understand retainer is required and fees are non-refundable for work performed. I understand no guarantee of outcome.

7. DECLARATION & SIGNATURE

I, the undersigned, declare that the information provided is true and correct. Agency #30000594 licensed under PSISA.

Signature (X)

Printed Name

Date / Time

AGENCY USE ONLY — DO NOT WRITE ABOVE THIS LINE

File #: _____	Date Received: _____	Intake By: _____
☐ Conflict Clear ☐ Conflict	☐ Low ☐ Med ☐ High	Approved By: _____
☐ ID Verified ☐ Licence Verified	Retainer: \$ _____	☐ File Opened: Yes ☐ No

All Ontario Intelligence & Investigation | Agency Licence #30000594 | Licensed under Private Security and Investigative Services Act, 2005
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