

**ARMANDO ZATARAIN INVESTIGATIONS**  
**Client Intake Sheet**

Date \_\_\_\_\_ Drivers Lic. # \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail address \_\_\_\_\_

Address \_\_\_\_\_ Apt. # (if any) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Are you buying or renting \_\_\_\_\_ How long at address \_\_\_\_\_ yrs.  
\_\_\_\_\_ mos.

Employer \_\_\_\_\_ Social Security # \_\_\_\_\_

Employer's phone (\_\_\_\_\_) \_\_\_\_\_

Occupation \_\_\_\_\_

Are you a U.S. citizen? \_\_\_\_\_ Yes \_\_\_\_\_ No. If not, what is your country of origin?

\_\_\_\_\_

Do you hold any professional licenses or certifications? \_\_\_\_\_ Yes \_\_\_\_\_ No.

If so, what type of license or certifications do you hold?

\_\_\_\_\_

PLEASE GIVE THE NAME, ADDRESS AND PHONE NUMBER OF A FRIEND  
OR RELATIVE WHO WILL **ALWAYS** KNOW HOW TO CONTACT YOU

Friend/Relative \_\_\_\_\_

Address \_\_\_\_\_ Apt. # (if any) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

PLEASE WRITE DOWN THE NAME, ADDRESS AND PHONE NUMBER  
OF A FRIEND OR RELATIVE WHO WILL ALWAYS KNOW HOW TO CONTACT YOU

Friend/Relative \_\_\_\_\_

Address \_\_\_\_\_ Apt. # (if any) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_