

R.C. Ranno Investigative Services, LLC – Assignment Request Form

Please complete the form in its entirety as the more information we receive the more detailed and investigation we can complete for you. Any information that is unknown or not relevant, please leave blank. Thank you.

Date: _____ / Intake Date: _____ / Date of Accident or incident: _____

Type of Investigation: (Circle one or more) Witness Statement(s) / Locate Person(s) / Location Photographs / Accident Diagram / Surveillance / Asset Search

Your Name: _____ Your File Number: _____ Attorney on File: _____

Your Contact Number: _____ Your Email Address: _____

Plaintiff Information: Plaintiff (Client) Name: _____

Address: _____ D.O.B. _____ SSN _____

Home Telephone: _____

Cell Phone Number: _____

Work Address: _____ Work Telephone: _____

Work Hours: _____

Best Time to Reach: _____

Describe incident, accident or reason for request: _____

Accident report provided: _____ Intake form provided: _____ Faxed for Emailed (Circle One)

Please provide specifics you are requesting on this file. Provide any specific reasons for insurance denial or obtaining of statement

Defendant / Accident Information: (If accident please provide police report) If no report do your request us to obtain it? _____

Exact Incident Location: _____

Name of Ownr / Lndlr: _____ Address of Ownr / Lndlr: _____

Exact location on property where injury occurred: _____

Items to look for when at location: _____

What were conditions at time of accident / incident: _____

Witness Information: (Please provided as many details on witnesses to eliminate additional investigative time to locate them prior to obtaining statements)
(If witnesses on provided police report, only provide names and numbers known)

Witness # 1 Name: _____ Address: _____

Contact Number #1 _____ Contact # 2 _____

Witness # 1 Name: _____ Address: _____

Contact Number #1 _____ Contact # 2 _____

It is understood that any information provided with this form may contain legally privileged or confidential information, and understand that this information is intended for R.C. Ranno Investigative Services, LLC staff only. Please fax this document to (860) 347-1792 or email document to info@CheatersCT.com. Thank you.

