

Investigation Referral

Please give as much information as possible.

Informant _____ Date _____

Address _____

Telephone _____

Does the informant agree to be contacted by the Investigator if necessary? Yes No

Tenant Information

Name of Tenant _____

Name of landlord: _____
Filled out by Agency

Address of Tenant: _____

Contract No. _____
Filled out by Agency

City _____ State _____ Zip _____

Location of occurrence

City _____ State _____ Zip _____

Description of Suspected Activity

Unauthorized Person Living in Home

Name of possible unauthorized person: _____

Description of above if known: Sex _____ Age _____

Race _____ Ht. _____ Wt. _____

Hair color/length _____ Misc. _____

Vehicle owned by unauthorized person:

Make _____ Year _____

License and state _____ Color _____

Misc. _____

Unreported Income

Place of unreported employment of

Tenant or unauthorized person: _____

Time leave _____

Vehicle owned by Tenant if not reported

Make _____ Year _____

License and state _____ Color _____

Misc. _____

Summary of Suspicion

If employee noted discrepancy, give brief statement of how it came to your attention:

