

CLIENT AFFIDAVIT - TRACKING DEVICE PLACEMENT AND USE

Utah Code 76-9-408 prohibits the placement of a tracking device on a motor vehicle if the owner, lessee or operator, or the co-residents or immediate family members of the owner, lessee or operator of a motor vehicle is a person protected under a court-issued protective order. A protective order is any temporary or permanent restraining order, protective order, stalking injunction, or similar order issued by any court in any matter prohibiting or limiting the contact between one or more persons by another person or persons. **Placement of a tracking device on the motor vehicle of a protected person is a crime.**

INFORMATION ABOUT VEHICLE TO BE TRACKED (COMPLETE AN INDIVIDUAL FORM FOR EACH VEHICLE TO BE TRACKED)

| | | | | |
|--|-------|-----------------------|------------------------|---------------|
| Owner/Lessee Full Name | | Date of Birth | Social Security Number | |
| Residence Address | | City, State, Zip Code | Phone Number | |
| Employment Address | | City, State, Zip Code | Phone Number | |
| Vehicle Manufacturer/Make | Model | Year | Color | License Plate |
| Operator Full Name (Other than Owner Lessee) | | Date of Birth | Social Security Number | |
| Physical Description (gender, skin color, height, weight, hair color and style, facial hair, eye color, glasses, distinguishing marks or habits) | | | | |
| Operator Full Name (Other than Owner Lessee) | | Date of Birth | Social Security Number | |
| Physical Description (gender, skin color, height, weight, hair color and style, facial hair, eye color, glasses, distinguishing marks or habits) | | | | |

With regard to any owner, lessee, or operator of the motor vehicle to be tracked, or any co-resident or immediate family member of any owner, lessee or operator of said motor vehicle (inclusively the "Operators"), the undersigned acknowledges and affirms the following:

- I am aware of or have knowledge of a temporary or permanent protective order** being issued by a court that protects any Operator.
- I am not aware of nor do I have knowledge of any temporary or permanent protective order** being issued by any court that protects any Operator.
- I am the subject of a temporary or permanent protective order** issued by a court that protects another person.
- I am not, nor have I ever been a subject of any temporary or permanent protective order** issued by any court that protects another person.
- I acknowledge that I will immediately inform the investigator** if a I become aware of any temporary or permanent protective order being issued by any court that protects any Operator.
- I acknowledge that I am requesting this investigation only for permissible purposes** and that the information discovered during the investigation will not to be used for harassment, stalking, intimidation, threatening or any other unlawful or non-permissible purpose.
- I understand that this affidavit will become part of any previously executed agreement or contract** between the me and the investigator and will become part of the investigation file in this matter.

I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the _____ day of _____, 20____, at _____.

Printed Name

Signature

CLIENT AFFIDAVIT - TRACKING DEVICE PLACEMENT AND USE (Co-Resident and Immediate Family Information)

VEHICLE OWNER/LESSEE/OPERATOR CO-RESIDENT(S)

OFFICE USE

Full Name _____ Date of Birth _____ Relationship _____

Physical Description (gender, skin color, height, weight, hair color and style, facial hair, eye color, glasses, distinguishing marks or habits) _____

Full Name _____ Date of Birth _____ Relationship _____

Physical Description _____

VEHICLE OWNER/LESSEE/OPERATOR IMMEDIATE FAMILY

Full Name _____ Date of Birth _____ Relationship _____

Physical Description (gender, skin color, height, weight, hair color and style, facial hair, eye color, glasses, distinguishing marks or habits) _____

Full Name _____ Date of Birth _____ Relationship _____

Physical Description _____

Full Name _____ Date of Birth _____ Relationship _____

Physical Description _____

Full Name _____ Date of Birth _____ Relationship _____

Physical Description _____

Full Name _____ Date of Birth _____ Relationship _____

Physical Description _____

OFFICE USE ONLY - DILIGENCE RECORD

| AGENCY TYPE | NAME/CONTACT | DATE | RESULTS |
|------------------------|--------------|-------|---------|
| Court Records | _____ | _____ | _____ |
| Court Records | _____ | _____ | _____ |
| Public Records | _____ | _____ | _____ |
| Public Records | _____ | _____ | _____ |
| State Agency | _____ | _____ | _____ |
| Law Enforcement | _____ | _____ | _____ |
| Other | _____ | _____ | _____ |
| Other | _____ | _____ | _____ |