

# Valdes Investigation Group

A1700169

## Retainer Agreement contract for Professional Services

This agreement is made and entered into this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ by and between

**Client Name:** \_\_\_\_\_ and Valdes investigation Group.

CLIENT states that he/she has a legal right to have this investigation made to obtain information on said parties, business, etc. and that there is no restraining orders/injunctions with regards to this matter.

Valdes Investigation Group agrees to perform investigative services every day for the CLIENT, the client's attorney, or other agency designated by the client, in exchange for the fees set forth below. In consideration for the mutual promises and agreements herein contained, the CLIENT and Valdes Investigation Group do hereby agree and contract as follows:

The CLIENT shall pay in advance \$ \_\_\_\_\_ to Valdes Investigation Group to serve as an initial retainer to be applied towards the investigative services at an hourly rate of \$ \_\_\\_\_ per Investigator. Should the CLIENT terminate this investigation prior to its completion, any/all claims to the unexpended portion of the retainer is hereby waived and released. Any remaining balance of said retainer shall be applied to future investigations for the period of one year from the date of this agreement. Should this investigation require additional funds, the CLIENT agrees to provide Valdes Investigation Group additional retainer funds or conclude the investigation at the CLIENT'S discretion.

The CLIENT agrees to pay for actual expenses incurred during the course of the Investigation. These expenses include but are not limited to; mileage at \$ \_\_\_\_\_ cents per mile, tolls, parking fees, copies of the records/documents, videos, reports, and any other reasonable and necessary charges. When possible, the CLIENT will be contacted and advised of any extraordinary expenses that shall arise or expected to exceed the original agreement.

The CLIENT agrees to allow Valdes Investigation Group to conduct the above investigation at its able discretion via any means it deems to be appropriate. The CLIENT, his/her heirs, beneficiaries, devisees, legatees, administrators, and signers agree to indemnify and hold harmless Valdes Investigation Group and it's agents and employees from any and all actions, causes of actions, claims, damages, and demands of whatever type, wherever situated, arising directly or indirectly from their investigations which the CLIENT has requested; such indemnification shall include, but not be limited to, attorney's fees and costs incurred by Valdes Investigation Group. It is understood that the relationships between the CLIENT and Valdes Investigation Group will be held in confidence per Florida State Statues, Chapter 493. The CLIENT understands that Valdes Investigation Group makes no promises or guarantees concerning the outcome of the investigation.

Any deception, real or attempted, of Valdes Investigation Group by the CLIENT shall result in a termination of services and forfeit of any retainer fee paid to Valdes Investigation Group by the client. The presence of the CLIENT at the site of surveillance unless specifically directed by Valdes Investigation Group, is strictly prohibited and can result in the forfeiture of any retainer fee.

In the event of an outstanding balance, no report, videos, documentation, or work product will be released to the CLIENT until the account is paid in full.

The CLIENT agrees to pay any amounts or expenses incurred above the retainer. The CLIENT agrees to be responsible for all fees, legal or otherwise, necessary in enforcing in collecting this agreement or arising from the agreements. If any portion of this contract is held to be invalid, then the remainder shall retain its full force and effect. The contract becomes binding upon all parties hereto when signed.

**Nature of investigation/Additional Info:** \_\_\_\_\_

Investigator's Per Hour Rate \$ \_\_\_\_\_

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### Method of Payment:

Credit Card No: \_\_\_\_\_ Expiration: \_\_\_\_\_ CVC Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Zelle/Venmo/Cash App

Cash

**CLIENT SIGNATURE:** x \_\_\_\_\_ **DATE:** \_\_\_\_\_ **TIME:** \_\_\_\_\_