

<b>STATE OF CONNECTICUT</b> DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION <b>DIVISION OF SCIENTIFIC SERVICES</b> 278 COLONY STREET, MERIDEN CT 06451 TELEPHONE (203) 639-6400 FAX (203) 639-6484	<h1 style="margin:0;">REQUEST FOR ANALYSIS</h1>	 <div style="display: flex; justify-content: space-between;"> <span>Laboratory Identification Number</span> <span>Laboratory Use Only</span> </div>
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<b>Has evidence been previously submitted?</b>		If "Yes", Laboratory Number: _____		<b>Investigating Officer Requesting Analysis(Print Name):</b>  Phone Number: Email Address:	
<b>Name &amp; Address of Submitting Agency:</b>		Type of Offense: _____ Town of Incident: _____ Date of Incident: _____ Agency Case Number: _____			
Telephone:					

Name of Victim (Last, First, M)	DOB	Race	Sex	Name of Suspect (Last, First, M)	Arrest Made?	DOB	Race	Sex	SPBI#

**Detailed Case History (or attach Police Report or Complete Search Warrant):**

Information on Evidence Submitted		Type of Examination Requested (check box)												Respond: Yes or No	
Agency Item#/ Exhibit#	Briefly describe the contents of each package of evidence	Arson/GSR	Biology/DNA	Firearms/ Toolmarks	Imprints/ Footwear	Latent Prints*	Quest. Docs	Trace	Controlled Substance	Toxicology**	Computer Analysis	Video/Audio	Other (Explain)	Was this evidence collected at the primary crime scene?	Was this evidence collected from the suspect's person or possession?

**Property Crimes: Is total property loss or damage over \$2,000.00?**

*If "No", please contact the Laboratory prior to submitting the evidence*

<b>Person Submitting Evidence (Print Name):</b>	<b>Date:</b>
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\*All Latent Print non-porous evidence must be fumed prior to submission unless other arrangements have been made with the Laboratory.

\*\*DUI evidence should be accompanied with Form DPS-0009-C (Rev. 9/2013)

TELEPHONE (203) 639-6400 FAX (203) 639-6484

# REQUEST FOR ANALYSIS



*Laboratory Use Only*

Submitting Agency Case Number: \_\_\_\_\_

Information on Evidence Submitted:		Type of Examination Requested: (check box)												Other (circle response)	
Agency Item#/ Exhibit#	Briefly describe the contents of each package of evidence	Arson/GSR	Biology/DNA	Firearms	Imprints	Latent Prints*	Quest. Docs	Trace	Controlled Substance	Toxicology	Computer Analysis	Video/Audio	Other (Explain)	Was this evidence collected at the primary crime scene?	Was this collected from the suspect's person or possession?
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