

# PLEASE TYPE ALL INFORMATION

DCJS-9 (3/99)

STATE OF NEW YORK  
DIVISION OF CRIMINAL JUSTICE SERVICES  
BUREAU OF IDENTIFICATION & CRIMINAL HISTORY OPERATIONS  
4 TOWER PLACE  
ALBANY, NEW YORK 12203-3764  
518 - 457-6051 (54)

**INSTRUCTIONS:**

*This form is to be used only when a fingerprint card is not possible.  
Shaded boxes are required data elements.  
Item D - INDICATE SPECIFIC PURPOSE FOR INQUIRY:*

**CORRESPONDENCE INQUIRY**

<p><b>A. DATE</b></p>	<p><b>B. REQUEST FOR</b></p> <p><input type="checkbox"/> Criminal Record</p> <p><input type="checkbox"/> Other (Specify)</p> <p>_____</p> <p>_____</p>			<p><b>C. REQUESTING AGENCY (NAME, ADDRESS &amp; TELEPHONE NO.)</b></p>	<p><b>D. REASON FOR REQUEST &amp; CASE NUMBER</b></p>
<p><b>1. NYSID NO.</b></p>	<p><b>2. NAME (LAST, FIRST, MIDDLE)</b></p>		<p><b>3. ADDRESS (LAST KNOWN)</b></p>		
<p><b>4. NICKNAME</b></p>	<p><b>5. ALIAS AND/OR MAIDEN NAME</b></p>		<p><b>6. SEX</b></p> <p>M   F</p>	<p><b>7. RACIAL APPEARANCE</b></p> <p>White   Black   Am. Indian   Japan   Chin.   Other</p>	
<p><b>8. SKIN TONE</b></p> <p>Light   Medium   Dark</p>	<p><b>9. HEIGHT</b></p> <p>Ft.   In.</p>	<p><b>10. DATE OF BIRTH</b></p> <p>Mo.   Day   Yr.</p>	<p><b>11. AGE</b></p>	<p><b>12. PLACE OF BIRTH</b></p>	
<p><b>13. AGENCY ORI NO.</b></p>		<p><b>14. SOCIAL SECURITY NO.</b></p>		<p><b>15. FBI NO.</b></p>	
<p><b>16. DCJS AGENCY CODE NO.</b></p>		<p><b>16A. ADDITIONAL DATA (KNOWN CRIMINAL ACTIVITY, PHYSICAL ODDITIES, ETC.)</b></p>		<p>C O N T R O L  D A T A</p>	<p><b>17. NAME OF REQUESTING OFFICER</b></p>
<p><b>16. DCJS AGENCY CODE NO.</b></p>		<p><b>16A. ADDITIONAL DATA (KNOWN CRIMINAL ACTIVITY, PHYSICAL ODDITIES, ETC.)</b></p>			<p><b>18. AUTHORIZED BY (SIGNATURE)</b></p>
<p><b>16. DCJS AGENCY CODE NO.</b></p>		<p><b>16A. ADDITIONAL DATA (KNOWN CRIMINAL ACTIVITY, PHYSICAL ODDITIES, ETC.)</b></p>			<p><b>19. TITLE</b></p>

INPUT DATA

DCJS USE ONLY

RESULTS OF INQUIRY

DATE \_\_\_\_\_

NO CRIMINAL RECORD IN NEW YORK STATE

RECORD ATTACHED

1

OTHER (SEE REMARKS)

REMARKS:

1 This response is based on other than a fingerprint identification.

**DISTRIBUTION**

White Copy - DCJS Response Transmittal  
Yellow Copy - Requester's File Copy