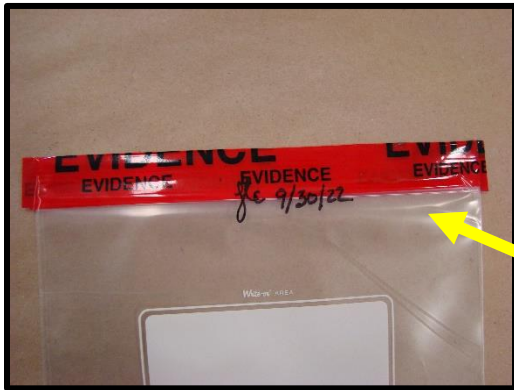


# CPS Laboratory – Firearm Submission Procedure

(applies to ALL firearms, BB guns, air guns, barrels, frames, etc.)

## 1. FIREARM SAFETY CHECK

- remove detachable magazine, if applicable
- clear ammunition from chamber(s) and any integral magazine, if applicable
- **VISUALLY CHECK** that the chamber is clear
- Secure a **ZIP TIE** through the action (plastic zip tie, chamber flag, etc – NO METAL!)



## 2. SEAL items with EVIDENCE TAPE in appropriate packaging (ex. plastic bag or box)

- Put **AMMUNITION** in **SEPARATE** packaging, not loose in the bag with the firearm
- **ALL SEALS** should include the **date** and **initials** across the seal

## 3. Attach a **SIGNED SAFETY VERIFICATION LABEL** to the **OUTERMOST** package

- Labels are provided in the CPS Lab locker area or they can be created by the agency
- Writing “SAFE” (or something similar) on the outermost packaging and signing near it is also acceptable
- If the outermost packaging of a firearm is a box, paper bag or envelope, **THE SAFETY LABEL MUST BE ON THE OUTERMOST PACKAGING**



REQUEST FOR LABORATORY EXAMINATION			
SUBMITTING AGENCY: P.O. BUREAU		CASE/CD NUMBER:	
INVESTIGATING OFFICER: BUSINESS PHONE:		E-MAIL ADDRESS:	
CHARGE:		DATE/TIME OF OCCURRENCE: PROSECUTOR:	
CHECK IF APPLICABLE: Safe of controlled substance		Asset Forfeiture Case:	
DEFENDANT(S): (last name, first name)	Date of Birth:	VICTIM(S): (last name, first name)	Date of Birth:
Has any other evidence in this case been submitted to the laboratory previously? Yes No			
CPS Item #	AGENCY Item #	DESCRIPTION OF EVIDENCE:	EXAMINE FOR: WHERE OBTAINED:
COMMENTS: DO NOT WRITE IN SHADDED AREAS			
THIS SIDE TO BE COMPLETED BY THE SUBMITTING OFFICER		THIS SIDE FOR LABORATORY USE ONLY	
SUBMITTED BY: (signature)		RECEIVED: <input type="checkbox"/> Unloaded	
PRINT NAME: (signature)		<input type="checkbox"/> Unloaded	
LOCKER NO.:		<input type="checkbox"/> Inspected with cross cuts	
DATE/TIME SUBMITTED:		DATE/TIME REC'D:	
By signing this form you acknowledge that the laboratory will select the appropriate tests to be analyzed and the methods of analysis. Go to <a href="http://www.cpslab.com/Responsibility">http://www.cpslab.com/Responsibility</a> for laboratory information, guidelines and forms.		RECEIVED BY: (signature)	
DOPIS-6		LAB. NO.:	
Revised: July 11, 2006, P.M.D.		SUBMISSION #:	
Issue date: 06/15/2014		PAGE # OF 1	

## 4. REQUEST FOR LABORATORY EXAMINATION FORM

- This form **MUST** be included with **EVERY SUBMISSION**