

FIRE INVESTIGATION Evidence Submission Form



FSS-F-F-EI-1005
Issue Date: 02/01/2020

- New Case**
- Additional** BCA Lab Case# _____
- Resubmission** BCA Lab Case# _____

1430 Maryland Ave E
St. Paul, MN 55106
Phone: 651-793-2900
Fax: 651-793-2901

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Bemidji, MN 56601
Phone: 218-755-6600
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St. Cloud, MN 56303
Phone: 320-249-2689
Fax: 651-793-2901

Website: bca.dps.mn.gov
Email: bca.lab.vault@state.mn.us

Complete pages 1 and 2

Type of Offense	County of Offense	Date of Offense	Jury Trial Date
Investigating Agency		Submitting Agency	
Investigating Officer's Name		Submitted by	
Investigating Officer's Direct Phone & Email Address		Additional Agencies Involved	
Investigating Agency Case / ICR #		Location of Offense	
Prosecutor's Name and Contact Information			

Associated Individuals (S=Suspect, V=Victim, E-Elimination, O=Other/Owner)

#	S/V/E/O	Name (Last, First, Middle)	Sex	Race	DOB (MM/DD/YYYY)	SID/FBI Number
1						
2						
3						
4						
5						
6						

Description of Evidence

**Comparison samples must be from the same substrate as one of the fire debris samples*

Agency Item#	Brief Description and Recovery Location	Individual Associated <small>(use number(s) above)</small>	Date Collected <small>(mm/dd/yy)</small>	Comparison Sample* <small>(Yes/No)</small>	Requested Analysis <small>(refer to codes below)</small>	Other Information <small>(previous BCA item #, etc.)</small>
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		

Brief Summary of Case and Special Circumstances

	<p>Requested Analysis Codes CT: Chemical Testing DNA: DNA LP: Latent Prints</p>
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Investigating Agency

Agency Case #

**PLEASE CHECK THE SECTIONS THAT CORRESPOND TO
REQUESTED TESTING ON PAGE 1 AND ANSWER ALL
ASSOCIATED QUESTIONS**

Chemical Testing (CT)

Check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> Commercial Property | <input type="checkbox"/> Death Investigation |
| <input type="checkbox"/> Dwelling | <input type="checkbox"/> Fire Investigation |
| <input type="checkbox"/> Occupied Dwelling | <input type="checkbox"/> Vehicle |

Was a suppressant other than water used (e.g. encapsulator agent, foam, soap)? Yes No

If Yes, list trade name:

Has a sample been submitted for comparison? Yes No

DNA and/or LP (DNA, LP)

Are latent prints or DNA testing needed on any items of evidence? Yes No

Has the evidence been previously processed for latent prints? Yes No

Are images of processed prints being provided? Yes No

Are known DNA samples and/or prints available from all principals? Yes No If No, will they be provided? Yes No

*Please Note: DNA samples collected from convicted offenders for inclusion in the DNA database CANNOT be used as evidence specimens.
Please Note: Known prints for law enforcement are NOT kept on file.*

If evidence is being examined for prints in blood, is there a question as to the source of the blood? Yes No