

Please read the contents of this form carefully before submitting the case.

This form must be properly filled by the submitting officer and submitted along with the complete evidence and supporting documents; otherwise, the case will not be accepted.

Case No./ FIR (U/S & Date) /Diary No.			
Police Station/Organization/Department			
Type of Case:	☐ Civil	☐ Criminal	☐ Departmental Inquiry ☐ Other
Case Title:			
Fee (Amount in Rs. _____)	Paid	☐ Yes	☐ No

Case Type (Check relevant box only)	Sample Type (Check relevant box only)
☐ Sexual Assault	☐ Vaginal swabs ☐ Anal swabs ☐ Oral swabs ☐ Body surface area swab ☐ finger nail swabs ☐ Finger nail clippings ☐ Assault weapon ☐ clothing ☐ condom ☐ bedding ☐ Sexual assault kit ☐ Others
☐ Homicide/Murder/Attempted Murder	☐ Soil ☐ Cotton ☐ Swab ☐ Weapon ☐ Clothing ☐ Bedding ☐ Buccal swabs ☐ Finger nail swabs ☐ Finger nail clippings ☐ Others
☐ DBI/DVI (Dead Body Identification/Disaster Victim Identification)	☐ Buccal swabs (if the corpse is fresh and head intact) ☐ Blood sample ☐ Nail ☐ Teeth ☐ Bone marrow swab (in case of fresh bone) ☐ Long bone (for decomposed bodies) ☐ Fetus ☐ Hair with roots ☐ Skin/Flesh/deep cut swab (only in cases of explosion/mass disaster)
☐ Parentage/ kinship	☐ Buccal swabs ☐ Conception material ☐ Personal belongings (razor, tooth brush) ☐ Fetus ☐ Others _____
☐ DNA Database Profiling/Searching	☐ Buccal swabs ☐ STR profile (international/sensitive cases)
☐ Theft/burglary/blasphemy	☐ Swabs (touch DNA) ☐ Weapon ☐ Belongings (cap, gloves, shoe) _____ ☐ Glass/Bottles ☐ Holy Quran/verses ☐ Others _____
☐ Others	Specify:

Requested By	Submitting Authority/ Name & Address		
Submitting Person	Name	Signature	Stamp & Date
Contact Detail(s)	Phone Number	Email	

Important Instruction: All biological exhibits for DNA and Serology must be air dried and packed separately within breathable paper envelopes and cardboards. Do not use any preservative (like formalin). Transport Fetus, flesh, bone marrow and conception material immediately after packaging at 4°C.