



Greater Houston Regional Computer Forensic Laboratory

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Service Request Form

Agency Information

Agency:

Submitter:

Address:

Cell:

Investigator:

Case Information

Desk:

Agency No:

Cell:

Suspect(s):

Email:

Victim(s):

Supervisor:

Violation:

Phone:

Request Type: Search Examination (page 2) Technical (page 2)

Related to a Previous GHRCFL Case: Yes No GHRCFL Case:

Search Assistance

Legal Authority	<input type="checkbox"/> Warrant <input type="checkbox"/> Consent <input type="checkbox"/> FISA Docket: _____		
	<input type="checkbox"/> Other:		
<input type="checkbox"/> Business	<input type="checkbox"/> Residence	Search Date	
Address		Number/Type of Computers, Servers, Other	
Imaging on site?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If yes, please explain reason below</i>	
Service Requested			

GHRCFL USE ONLY

Lab Number			
Date Received		Date Assigned	
Received By		Assigned By	
Comments:		Examiner assigned	
		Date CART DB	

Examination

Legal Authority	<input type="checkbox"/> Warrant <input type="checkbox"/> Consent <input type="checkbox"/> FISA: Docket #: _____ <input type="checkbox"/> Other:		
Date Needed			
Description of evidence			
Has Evidence been previously viewed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>If yes, please describe method and reason below</i>
Any privileged information expected	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<i>If yes, please describe below</i>
List any Known Passwords, Emails Addresses, Etc...			
Service requested			
Place into CAIR?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	CAIR Trained? <input type="checkbox"/> Yes <input type="checkbox"/> No
Offense Details <i>Please use additional pages as necessary</i>			

Technical Assistance

<input type="checkbox"/> Copy Original Evidence <input type="checkbox"/> Copy Derivative Evidence (Results) <input type="checkbox"/> Contraband Defense Review <input type="checkbox"/> Technical Issues <input type="checkbox"/> Other
Description of Assistance

GHCFL USE ONLY**Lab Number**

GHCFL (V3-10-14)

GHR CFL USE ONLY

Lab Number:

GHR CFL (V3-10-14)