

Idaho State Police

Biometric Image Comparison Submittal Form

Requestor's Name*:
Requesting Agency*:
Requesting Agency Address*:
City*, State*, ZIP*
Requestor's Phone Number*: Email:
Agency Case Number*:
*Required Information Probe photo must be attached or included with submittal form
Criminal Justice Purpose for Request*: (choose any that apply)
Reasonable suspicion that an identifiable individual has committed a criminal offense or is involved in planning criminal (including terrorist) conduct or activity that presents a threat to any individual, the community, or the nation and that the information is relevant to the criminal conduct or activity.
Active criminal case briefings held within a criminal justice agency
Active or ongoing criminal or homeland security investigation
To assist in the identification of a person who lacks capacity or is otherwise unable to identify him- or herself (such as an incapacitated or deceased person)
To investigate and/or corroborate tips and leads
In court, as part of a complete criminal investigation
As part of authorized user training, using only publicly available or volunteer images
I, the undersigned, have read and agree to abide by the requirements in the Idaho State Police Biometric Image Comparison Policy. By submitting this probe image and signing this document, I also agree to the following:
The result of a facial image comparison search is provided by the Idaho State Police only as an investigative lead and IS NOT TO BE CONSIDERED A POSITIVE IDENTIFICATION OF ANY SUBJECT. Any possible connection or involvement of any subject to the investigation must be determined through further investigation and investigative resources.
Requestor's printed name Date of Submission
Requestor's signature Submit Completed form
Agency POC signature to afis@isp.idaho.gov

Response returned via:(choose preferred)

Encrypted email (provided above)
LEEP account email (provided above)
ILETS Intranet encrypted attachment