

SEARCH WARRANT APPROVAL FORM**(Assigned by Reviewer)**Rev. 4/22/16
Page 1 of ____**A. CASE INFORMATION**

CONTROL #:

1. NAME OF APPLICANT

2. AGENCY

3. TELEPHONE #

4. DATE

5. TIME

6. Method of Submittal

E-mail/Fax Phone In-Person

7. Is applicant the affiant/lead agent?

Yes No

8. Type of Case (crime suspected)

9. Previous application involving subject/premises?

Yes No

10. Type of warrant sought:

In-person Telephonic 11. Warrant based upon: Written affidavit
Sworn oral testimony Both 12. Investigation involved confidential informant or source? Yes No 13. Are you seeking a "no knock" entry or unusual time for execution? Yes No **B. INTERAGENCY COORDINATION INFORMATION**

14. Length of Investigation

15. a) Was this a joint investigation or task force case? Yes No b) Did any other agency contribute to investigation or supply information? Yes No

If YES, name of agency:

16. Does criminal activity/operation extend beyond jurisdiction of applicant's agency? Yes No Unknown 17.a) Is a subject of the investigation or a premises to be searched believed to be associated with terrorist activities? Yes No b) Is a subject of the investigation or a premises to be searched believed to be associated with sophisticated criminal enterprise? Yes No c) Is a subject of the investigation or a premises to be searched believed to be associated with organized crime? Yes No

18. Do you have reason to believe that a target of the current investigation:

a) is a defendant in any pending criminal matter? Yes No b) is an informant/cooperating witness for any law enforcement agency? Yes No c) has ever been detained or questioned by another law enforcement agency? Yes No d) is the subject of an outstanding arrest warrant or B.O.L.O. bulletin? Yes No

If YES to 18. (a-d), name of agency:

19. Has a deconfliction query been made in accordance with AG Directive 2016-1? Yes No If Yes, did the deconfliction query result in a conflict alert? or negative match?

If No, explain (e.g. not feasible, exemption authorized) and detail any exigent circumstances:

If conflict alert issued, has contact been made with all interested agencies? Yes No

If Yes, identify all agencies and individuals contacted at same:

If No, explain reasons:

Has the conflict alert been resolved? Yes No

If Yes, summarize resolution:

If No, explain reasons:

20. CERTIFICATION: I certify that all of the information in this Application is true to the best of my knowledge and belief.

Signature: _____ Date: _____

SEARCH WARRANT APPROVAL FORM

C. REVIEW

21. Action Taken Approved Denied *Conditional Approval
*Explain Conditions

22. Resubmission to reviewer required?
Yes No

23. Judge to be contacted:

LEGAL SUFFICIENCY

24. Adequate description of place to be searched?
Yes No

25. Adequate description of property to be seized?
Yes No

26. Probable cause for each place to be searched?
Yes No

27. Basis for "no knock" or other unusual execution?
Yes No

INTERAGENCY COORDINATION

28. a) Is any place to be searched outside the jurisdiction of the reviewer?
Yes No

28. b) If Yes to 28 a), has the appropriate county prosecutor been notified?
Yes No

29. Does any other agency appear to have an interest in target/premises? Yes No

30. Has interested agency been consulted? Yes No
If No, explain if there are reasons for not requiring notification:

31. Name and title of person consulted:

Does any other agency object to the search? Yes No

32. Is there any indication that a subject of the current investigation or a premises to be searched is associated with terrorist activities? (If Yes, reviewer must promptly advise U.S. Attorney's office) Yes No

33. Reviewing Attorney: