

Gang File Group Code Request

PLEASE TYPE OR PRINT CLEARLY

Fax completed form to 304-625-5393, Attention: Investigative and Operational Assistance Unit/Gang File
or E-mail: VGTOFCODE@LEO.GOV.

*It is not necessary to submit more than one form with each request.
Additional groups may be listed in a similar format on another sheet of paper.*

REQUESTER: _____

AGENCY NAME: _____ **ORI:** _____

ADDRESS: _____

TELEPHONE NUMBER: _____ **FAX:** _____

Please complete this request by providing as much detail as possible. Before requesting a code for a gang group, you should ensure that one of the qualifying definitions (listed on the back of this form) is applicable.

DATE OF REQUEST: _____

Signature _____ Title _____

In conjunction with this request, have you already made an emergency Gang Group Member Capability NCIC record entry using the code GNG/UNLISTED GROUP? Yes No If yes, indicate date entry was made: _____

GROUP NAME: _____

LOCATION: (City/County where group operates.) _____

GROUP ALIASES: (List if applicable. Codes are not assigned to aliases, but aliases should be entered into the Miscellaneous Field of the Group Reference Capability record.)

SUBGROUP NAME: (If none, list phrase NONE KNOWN, the Subgroup Code that will be used for this group at the time of record entry.)

LOCATION: (City/County where subgroup operates.) _____

SUBGROUP ALIASES: (List if applicable. Codes are not assigned to aliases, but aliases should be entered into the Miscellaneous Field of the Group Reference Capability record.)

COMMENTS: _____

