

SAKI Purpose Area 6: National Cold Case Initiative (NCCI) Initial Inventory Certification Form

The information provided below will be used by the Bureau of Justice Assistance (BJA) and the National Sexual Assault Kit Initiative Training and Technical Assistance (SAKI TTA) team to certify an initial inventory of the violent cold case crimes your jurisdiction plans to address under SAKI Purpose Area (PA) 6: NCCI. Approval of the initial inventory certification form is required before any programmatic activity takes place.

Completion of a final inventory certification form will be required prior to closing out your award.

For any questions on this document or to request assistance, please contact the SAKI TTA project team via email at sakitta@rti.org.

1. SAKI grantee agency/jurisdiction: _____
SAKI Award Number _____
2. Date inventory initiated (month/year): _____
3. Date inventory completed (month/year): _____
4. Inventory information for violent cold case crimes funded under this award:
 - Inventories cannot include any violent cold case crimes that occurred after your application submission date.
 - Violent crimes are defined by the FBI's Uniform Crime Reporting (UCR) Program.
 - Written permission from BJA is required to proceed with sexually motivated crimes under PA6. You must request permission on a case-by-case basis if your site does not have active PA1, PA2, or PA4 awards.
 - Cases with an undetermined manner of death may be considered if circumstances strongly suggest a homicide. Written permission from BJA is required.
 - Missing persons cases may be considered if foul play is suspected.
 - Unidentified human remains cases may be considered if there is evidence suggesting a homicide.

Case Type	# of Cases	Date Range
Homicide		
Robbery		
Aggravated assault		
Missing person		
Unidentified human remains		
Other: _____		
TOTALS:		

5. Locations where your site stores evidence from inventoried violent cold case crimes:

- ☐ Law enforcement in-house evidence storage rooms
- ☐ Law enforcement off-site storage locations
- ☐ Medical examiner and/or coroner offices
- ☐ Crime laboratories
- ☐ Prosecutor's, district attorney's, and/or attorney general's offices
- ☐ Courts offices
- ☐ Other (specify): _____

6. Provide a summary of the methodology used to complete the inventory of violent cold case crimes in your jurisdiction. Consider including the following information: whether records were pulled from an electronic RMS or from physical case files; whether you focused on specific offenses, date ranges, or geographic locations for inclusion on the inventory; and what law enforcement agencies are included as part of your inventory efforts as well as how you conducted outreach to these agencies.

7. Describe your plan to locate evidence for cases included as part of the initial inventory. Include reference to any evidence storage locations identified in **Item 5**. *Confirmation of the physical existence of evidence is not required for this initial inventory but documentation of the availability of evidence for **each** case in your inventory will be required as part of the final inventory form.*

8. At minimum, you are encouraged to track the following data elements associated with each violent cold case crime as part of the inventory process: law enforcement incident number, offense type, and date of the offense. Describe the system you used to organize and track the necessary data elements for the inventory. For example, did you use a Microsoft Excel spreadsheet, Microsoft Access database, or evidence tracking software program?

9. Please describe any applicable statute of limitations on violent cold case crimes (as defined by FBI's UCR Program) that are included as part of your inventory.

10. Please provide the contact information for the following NCCI project team members, as applicable (name, title, agency, email):

a. Site Coordinator: _____

b. Prosecutor: _____

c. Law Enforcement: _____

d. Crime Laboratory: _____

e. Medical Examiner or Coroner: _____

f. Crime Analyst: _____

g. Family Advocate: _____

h. Other: _____

This document will be used to certify the initial inventory of violent cold case crimes performed by the above-identified SAKI grantee. Your digital signature confirms the information on this form is accurate.

Name of SAKI-NCCI site coordinator: _____

SAKI-NCCI site coordinator signature: _____

Date of form completion: _____

Contact email: _____

Contact phone number: _____

Submit the completed initial inventory certification form to your SAKI TTA PA6 Coordinator.

SAKI TTA PA6 representatives will complete the following information:

☐ SAKI TTA has reviewed this Initial Inventory Certification Form prior to submission to BJA.

Name

Date

BJA representatives will complete the following information:

☐ BJA has reviewed this Initial Inventory Certification Form for inventory requirements and completion.

BJA Policy Office—Title: _____ BJA Programs Office—State Policy Advisor

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