This form is used to modify, add, or remove arrest information in the III/NGI System. If there are multiple arrests for the same date, provide the Event Identifier (EVI) or the State Identification Number (SID), the Originating Agency Case Number (OCA), and the Originating Agency Identifier (ORI).

**Email completed form to: CK\_MISCDOCI@FBI.GOV**

**SUBMITTING AGENCY INFORMATION**

ORI: Submitter’s First and Last Name: Agency Email Address:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| UCN (Universal Control Number) | Master Name Last,First,Middle | DOA (Date of Arrest) | DOA Suffix | EVI (Unique Event Identifier) | SID/OCA/ORI  Use to distinguish between multiple arrests on the same date |
|  |  |  |  |  |  |

**INFORMATION TO BE MODIFIED, ADDED, OR REMOVED Note: Identity or Master information can only be updated by the agency which established the record.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Field to Modify** | **Information as it appears on the FBI record** | **Indicate Action:**  **Add,Modify,Delete** | **Information as it should appear on the FBI record** |
| NAME |  |  |  |
| SEX |  |  |  |
| RACE |  |  |  |
| HGT (Height) |  |  |  |
| WGT (Weight) |  |  |  |
| EYE |  |  |  |
| HAIR |  |  |  |
| DOB (Date of Birth) |  |  |  |
| SOC (Social Security Number) |  |  |  |
| SID (State Identification Number) |  |  |  |
| POB (Place of Birth) |  |  |  |
| CTZ (Citizenship) |  |  |  |
| AKA (Alias) |  |  |  |
| SMT (Scars, Marks, Tattoos) |  |  |  |
| MNU (Miscellaneous Number) |  |  |  |
| DOO (Date of Offense) |  |  |  |
| OCA (Originating Agency Case Number) |  |  |  |
| ORI (Originating Agency Identifier) |  |  |  |
| DOA (Date of Arrest) |  |  |  |
| IFFS (Identification for Firearms Sales) |  |  |  |
| \*AOL (Arrest Charges) |  |  |  |
| \*COL (Court Charges) |  |  |  |
| \*CPL (Disposition) |  |  |  |

\*To delete AOL, COL, or CPL, please submit request using FD-1114 Expungement Form

Paperwork Reduction Act Notice: According to the Paperwork Reduction Act of 1995, no persons are required to provide the information requested unless a valid OMB control number is displayed. The valid OMB control number for this information collected is 1110-0068. The time required to complete this information collected is estimated to be five minutes, including time reviewing instructions, gathering, completing, reviewing and submitting the information collection. If you have any comments concerning the accuracy of this time estimate or suggestions for reducing this burden, please send to: Department Clearance Officer, United States Department of Justice, Justice Management Division, Policy and Planning Staff, Washington, DC 20530