1-783 (Rev. 12-31-2022)

## Voluntary Appeal File (VAF) Application Form

You may apply electronically by visiting **https://www.edo.cjis.gov** or you may complete the following application. The VAF is offered for those who want the FBI to maintain information about themselves to avoid extended delays or erroneous denials with future firearm transfers. The VAF can also prevent similar results from occurring in other types of transactions submitted to the National Instant Criminal Background Check System (NICS). The submission of fingerprints is REQUIRED to process all VAF applications. Additionally, if a VAF application is being submitted by an attorney on behalf of their client, an *Authorization to Release* form MUST accompany the VAF application. The *Authorization to Release* form, a downloadable fingerprint card, and/or additional VAF information can all be found at https://www.edo.cjis.gov.

Please note, local law enforcement may be contacted as part of the application process.

APPLICANT'S INFORMATION * I	Denotes Required	d Fields			
*Last Name:		*First Name:		Name:	
Middle Name:		Suffix:	•		*Date of Birth:
*Place of Birth:	*State of Resid	dence:		*Country of C	itizenship:
*Sex (please check appropriate box):	*Ethnicity (please check appropriate box):			<u> </u> x):	Social Security Number:
☐ Male ☐ Female	☐ Hispanic or Latino ☐ Not Hispanic or Latino				
*Race (please check appropriate box):  ☐ Asian or Pacific Islander ☐ Blace	k □White □	☐Americ	can Indian o	r Native Alaskan	□ Unknown
Alien or Admissions Number (*mandatory if Country of Ci is other than U.S.):		of Citize	enship	Miscellaneous Nu	ımber (Driver's License, Military ID):
APPLICANT'S MAILING ADDRESS	6		APPLICA	ANT'S RESIDEN	ITIAL ADDRESS
*City: *State:			*County:		
*Postal (Zip) Code:			*City: *State:		
*Country:			*Postal (Zip) Code:		
Phone Number:			*Country:		
E-Mail:			*Reside within City Limits (please check appropriate box): ☐ Yes ☐ No		
APPLICANT'S STATEMENT: I gis supporting documentation provided will be entered into the VAF maintain Criminal Justice Information Service application, any supporting document application. I further understand if, to the FBI's CJIS Division, at the addinto the VAF, the FBI's CJIS Division	therewith, volur ined by the Nation es (CJIS) Division ntation, and any at any time, I w dress below. I c	ntarily vonal Insonal Insonal Insonal Insonal Insonal Insolution (1997) is to be the second of the s	vith the und stant Crimin rther volun ch informa e removed lerstand if d	derstanding that nal Background starily consent th tion relevant to from the VAF, I a disqualifying r	if my application is approved, I Check System Section of the FBI's nat the FBI may retain my the approval of my VAF can make such a request in writing
*ADDI ICANT'S SICNATUDE					DATE

National Instant Criminal Background Check System (NICS) 1000 Custer Hollow Clarksburg, West Virginia 26302-9922

If this form does not include your signature, your VAF application cannot be processed. You may mail the signed

VAF application, completed fingerprint card, and any supporting documentation to the following address:

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Have you previously experienced an extended NICS delay, open status, or pending status? $\square$ Yes $\square$ No
·Have you previously been denied or received a did not pass status, but your transaction was subsequently overturned? ☐ Yes ☐ No

## PRIVACY ACT STATEMENT

Authority: The collection of information on this form is authorized by 28 CFR 25.10(g).

Principal Purpose: The principal purpose of collecting the requested information is to allow the FBI to maintain information about you in the Voluntary Appeal File (VAF) for the purpose of preventing the future erroneous denial or extended delay by the National Instant Criminal Background Check System (NICS) of a transfer of a firearm, explosive, associated permit, or other NICS check. You do not have to provide the requested information to the FBI; however, failure to provide the requested information will result in the FBI's inability to retain your information in the VAF which may, in turn, result in a future erroneous denial or extended delay of a transfer of a firearm, explosive, associated permit, or other NICS check.

Social Security Account Number (SSAN): Your SSAN is requested to keep records accurate because other people may have the same name and date of birth. Your SSAN will be used to verify your identity. You are not required to provide your SSAN and failure to provide your SSAN will not result in a denial of your VAF application. However, failure to provide your SSAN may result in an increase of time to process your VAF application or requests for additional information to verify your identity.

Routine Uses: During the processing of your application and for as long thereafter as your information is retained in the VAF, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by 28 CFR Part 25, and applicable routine uses as set forth in the System of Records Notice for the NICS, DOJ/FBI-018, 84 FR 54175 (Oct. 31, 2019). Routine uses include, but are not limited to, disclosures to local, state, tribal, and territorial criminal justice agencies to determine whether transferring a firearm, explosive, or related permit to you is prohibited by state or federal law or whether to grant or deny an appeal from a NICS transaction; and to courts or adjudicative bodies for the purposes of resolving litigation or anticipated litigation.

## PAPERWORK REDUCTION ACT STATEMENT

Under the Paperwork Reduction Act, you are not required to complete this form unless it displays a valid OMB control number. The form takes approximately 10 minutes to complete.