

NOC Request Form

NOTE: One NOC Request per form

Track-It Number

Required Requestor Information:

Date -

Requestor Name:

Agency Name:

Contact Information - Preferred contact Method -

eMail

Phone

Reason for NOC Request -

Retainable as Criminal History - Yes No

Description of Crime -

Statute/Code Reference (Provide full NRS/County or City code # - may have multiple reference #s)
(Please provide a copy of the NRS/County or City code being referenced)

Provide Crime Class/Severity - Class A Felony Class B Felony Class C Felony Class D Felony Class E Felony
 Gross Misdemeanor Misdemeanor

Response from DPS/AOC

NOC Exists - Yes No NOC

Research/Recommendation from DPS - Create New NOC Research AOC Discuss

Results -

Resolution Date -

New NOC 50,000 Series 11 Digit

Denied - Reason for denial -

Systems/Synch - DPS
 AOC/Flags
 MCIJIS/NCS