

New York State Division of Criminal Justice Services
SERVICE AUTHORIZATION FORM

THIS FORM IS USED TO AUTHORIZE THE DIVISION OF CRIMINAL JUSTICE SERVICES TO PERFORM SERVICE ON THE INSTRUMENT IDENTIFIED. THIS AUTHORIZATION MUST ACCOMPANY EACH PIECE OF EQUIPMENT WHEN IT IS PRESENTED TO THE EQUIPMENT REPAIR CENTER FOR SERVICE.

SECTION I – AGENCY INFORMATION

Name of Agency		Today's Date
Address	City, State, ZIP	
Contact Person		Contact Telephone
Contact Telephone	Contact Facsimile	Contact Email

SECTION II – INSTRUMENT INFORMATION

Instrument Manufacturer		Model Number
Instrument Serial Number	Antenna Serial Number (if applicable)	
Date of Malfunction	Type of maintenance (check appropriate) <input type="checkbox"/> Calibration Check <input type="checkbox"/> Repair	
Brief Description of Malfunction		
List all parts, cables and/or accessories being submitted. Tuning forks must accompany all radar units.		
<i>I acknowledge I am signing this Service Authorization Form as an act and deed of said agency, organization, or municipality, and that I am duly authorized to sign same for the uses and purposes mentioned herein.</i>		
Signature		Date

DCJS USE ONLY

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