



DEPARTMENT OF PUBLIC SAFETY  
PROPERTY/EVIDENCE  
INVENTORY/INSPECTION FORM



Select Inspection: Annual Inventory/Inspection

Date: \_\_\_\_\_ Vault Location: \_\_\_\_\_ Inspector: \_\_\_\_\_

<b>OPR: 17 Evidence/Property Handling</b>	<b>Compliance</b>	<b>Non-Compliance (explain)</b>
1. Evidence Vault Records:  Comments:	<input type="checkbox"/>	<input type="checkbox"/>
2. Drop Box Secure:  Comments:	<input type="checkbox"/>	<input type="checkbox"/>
3. Evidence Checked in Timely:  Comments:	<input type="checkbox"/>	<input type="checkbox"/>
4. Packaging: <i>(Original SP-205 attached- single sided)</i>  Comments:	<input type="checkbox"/>	<input type="checkbox"/>
5. Biological Hazards Marked/DNA: <i>OPR:12 Exposure Plan; OPR: 40 Crime Scenes</i>  Comments:	<input type="checkbox"/>	<input type="checkbox"/>
6. Flammable or Explosives:  Comments:	<input type="checkbox"/>	<input type="checkbox"/>
7. Firearms:  Comments:	<input type="checkbox"/>	<input type="checkbox"/>
8. Money:  Comments:	<input type="checkbox"/>	<input type="checkbox"/>
9. Narcotics:  Comments:	<input type="checkbox"/>	<input type="checkbox"/>

Date: \_\_\_\_\_ Vault Location: \_\_\_\_\_ Inspector: \_\_\_\_\_

**OPR: 17 Evidence/Property Handling**

**Compliance**

**Non-Compliance  
(explain)**

10. Photographs, Videos, & Audio Recordings:  
*OPR: 48 Digital Cameras*

Comments:

11. Destruction Orders & Chain of Custody to Records:

Comments:

12. Using Current Forms:

Comments:

13. Other Record Keeping Mechanism:

Comments:

14. Inventory Sent to Officers every 90 days for  
Dispositions:

Comments:

15. Miscellaneous Items Found Not in Compliance:

Comments: \_\_\_\_\_

Comments or Recommendations: *(Attach additional sheets if necessary)*

Inspectors Signature: \_\_\_\_\_ Date: \_\_\_\_\_

District Representative Present: Yes  No  Name: \_\_\_\_\_

Incoming Evidence Custodian: Name:

Outgoing Evidence Custodian: Name:

***PLEASE ATTACH ADDITIONAL INFORMATION IF NEEDED.***