



Department of Criminal Justice Services  
 Forfeited Asset Sharing Program  
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**DCJS 999 Form**

**DCJS Seizure #:**

**SEIZED PROPERTY DISPOSITION  
 SHARING DECISION FORM**

Please type.

***SUBMISSION OF THIS FORM MUST BE ACCOMPANIED BY A COURT ORDER  
 AND A CHECK FOR FORFEITED CURRENCY OR BILL OF SALE OF FORFEITED ITEMS.***

<b>1. Seizing Agency:</b>	<b>E-Mail Address:</b>
<b>2. Seizing Agency Case No.:</b>	<b>3. Defendant's Name:</b>
	<b>4. Date of Court Disposition:</b>

**5. Disposition of Property Seized:**

<input type="checkbox"/> Forfeiture List of Item(s) Forfeited:	<input type="checkbox"/> Dismissal List of Item(s) Dismissed:	<input type="checkbox"/> Release to Lien Holder List of Item(s) Released:	<input type="checkbox"/> Return to Owner List of Item(s) Returned:
Expenses deducted:			

**For forfeited non-cash items, will this asset be requested for in-kind use or sale? (Check one)**  
 In-Kind    Sale    Not known at this time.  
**Upon sale of item, complete section 9 below and return with the bill of sale.**

**6. Contact Officer:** *(Print)*

Name	Title	Telephone
Signature:		Date:

**7. Joint Agency Sharing Decision:** Percentages must be listed for all agencies to equal remaining 90%

Agency: DCJS (Per §19.2-386.14)	10	%	Agency: _____	_____	%
Agency: _____	_____	%	Agency: _____	_____	%
Agency: _____	_____	%	Agency: _____	_____	%
Agency: _____	_____	%	Agency: _____	_____	%
Agency: _____	_____	%	Agency: _____	_____	%

**8. Certification:** I certify the above information is true and accurate, that the property transferred will be used for the law enforcement purpose stated, and that all monies received pursuant to this request will be deposited and accounted for consistent with applicable state laws, regulations, and court orders.

**Chief/Sheriff/Superintendent:** *(Print)*

Name _____	Name _____	Name _____
Title _____	Title _____	Title _____
Signature _____	Signature _____	Signature _____

**9. SALE OF ASSETS: Complete this section AFTER the sale of an asset for this case and submit.**

Description of item sold:	Date of sale:	Sale price:
Expenses deducted from sale price:	<b>Net proceeds:</b>	

**(If net proceeds are \$500 or more AND within a year from the date of the court order, submit a check for the net proceeds, copy of bill of sale, and this form to DCJS)**

**(If net proceeds are less than \$500 OR the sale was after one year from the court order date, then submit only this form and a copy of the bill of sale.)**