



External Law Enforcement Agency  
**REQUEST FOR MAIL COVER**

Complete all sections of the mail cover template below and attach a cover letter on your agency letterhead with an original signature by your immediate supervisor. These should be placed in an envelope endorsed **RESTRICTED INFORMATION**. Seal the request in the envelope, place it in a second envelope, and mail to the CISC. The mail cover request should be addressed as follows:

**CISC Manager  
 Attn: MC Specialist  
 222 South Riverside Plaza, Suite 1265  
 Chicago, IL 60606-6117**

For further instructions on mail cover requests submitted by external law enforcement agencies, please see **Publication 55, USPS Procedures for Mail Cover Requests**. This publication may be requested by contacting our Mail Covers Unit at 312-669-5673.

1. <u>DATE OF REQUEST</u>	2. <u>TYPE OF REQUEST:</u>  New Request: <input type="checkbox"/> Extension: <input type="checkbox"/> ( <i>Complete <b>only</b> Item 13</i> ) Fugitive: <input type="checkbox"/> ( <i>Refer to Item 7</i> ) Forfeiture: <input type="checkbox"/> ( <i>Refer to Item 8</i> )	3. <u>NUMBER OF DAYS:</u> Indicate the number of days requested:  30 days <input type="checkbox"/>  <i><b>Fugitive only:</b></i> 30 days <input type="checkbox"/> 60 days <input type="checkbox"/>
---------------------------	--	---

4. SUBJECT OF MAIL COVER NAME & ADDRESS: **Only one subject address may be requested on each mail cover template.** Identify the individual(s) or business(es) to be covered by indicating full name(s), address, and ZIP + 4 Code:

Name(s):  
 Address:  
 City:  
 State & Zip + 4:

If coverage of "All Other Names" receiving mail at the subject address listed above is needed, provide justification. Also, indicate any names that should be excluded from this request.

All Names at Subject Address:  Yes (provide justification below)     No

Justification:

5. INDICTMENT: Has the subject been formally charged, i.e. indictment or information with the offense that is the basis of this mail cover request?     Yes     No

6. ATTORNEY:

a) Does the subject(s) of the investigation have a known attorney?     Yes     No  
 If so, state the attorney's name and address.

b) If this request involves a fugitive, does the fugitive have a known attorney?     Yes     No  
 If so, state the attorney's name and address.

c) Is the mail cover subject a judicial officer (e.g. attorney, judge, etc.)?     Yes     No

7. FUGITIVE: If the cover involves a fugitive, state the fugitive's name, aliases, and any relationship between the fugitive and the mail cover subject.

8. FORFEITURE: If the only purpose of the mail cover is to identify property for forfeiture, state the legal basis for the forfeiture investigation, including the applicable forfeiture statute.

9. VIOLATION: State the applicable violation description, statute number, and penalty. If this involves a fugitive and the statute for the warrant is Unlawful Flight or Failure to Appear, also state the original charge.

Violation Description, *e.g. Wire Fraud*:

Statute, *e.g. Title 18 USC 1343*:

Penalty, *e.g. Ten Years*:

Is this violation a felony with imprisonment more than one year?  Yes  No

10. REASONABLE GROUNDS:

a) Basis - How has the mail cover subject violated, or is suspected of violating, the criminal statute? Make a definite statement that an official investigation into the possible violation of this criminal statute, fugitive search, or asset forfeiture is being conducted and cite the applicable section(s) of the United States Code or applicable State or Local law. Explain in detail your justification.

b) Purpose – What information do you expect to obtain from the mail cover? How will the mail cover facilitate the investigation, including the location of property or assets for forfeiture, or the location of a fugitive, e.g. banking information, co-conspirators, etc.?

c) Connection - If the mail cover subject is not the subject of the investigation, describe the affiliation of the mail cover subject to the subject of the investigation.

11. **CLASS OF MAIL:** Indicate the class of mail requested. Justification must be included for other than First Class.

First-Class Mail (Personal or business correspondence: Includes Priority Mail [generally over 11 oz.] and Express Mail)

Package Services (Parcel Post, bound printed materials, media mail and library mail)

---

Provide further justification for these classes of mail:

Periodicals (Magazines, newspapers)

Foreign Mail

Justification:

Justification:

Standard Mail (Bulk Business Mail)

Justification:

12. **SPECIAL INSTRUCTIONS:** State any special instructions or concerns about this particular request.

13. **REQUEST FOR EXTENSION:** *(For an extension request, complete only the section below.)*

*At the expiration of the mail cover period, or prior thereto, the requesting authority may request and be granted additional 30-day periods (60-day periods for fugitives). To ensure there is no gap in the mail cover, the extension request should be submitted a minimum of 10 days prior to the end of the mail cover. The requesting authority must provide a statement of the investigative benefits of the mail cover and the anticipated benefits to be derived from its extension. The request for an extension must state whether the subject has been indicted or an information filed and if the subject is represented by an attorney.*

*Per Postal Regulations, no mail cover shall remain in force longer than 120 continuous days unless personally approved for further extension by the Chief Postal Inspector.*

(a) MAIL COVER REFERENCE NO.:

(b) State, in detail, how the results of the prior mail cover assisted, or did not assist, the investigation.

(c) Describe the anticipated benefits to be derived from this mail cover extension.

(d) Regarding the violation under investigation, has the subject's indictment status changed since the previous mail cover approval?  Yes  No

(e) Has the subject's legal representation status changed since the last mail cover approval? If so, state the nature of the change, including attorney's name and address.  Yes  No

Mail covers are issued only to law enforcement agencies empowered by statute or regulation to conduct criminal investigations and are strictly controlled to assure proper use.

**Mail Covers are an investigative tool, and are not to be used as an initial investigative step.**

14. AGENCY NAME, REQUESTOR NAME, ADDRESS WHERE MAIL COVER RESULTS SHOULD BE MAILED (with Zip + 4 code), TELEPHONE NUMBER, FAX NUMBER AND E-MAIL ADDRESS:

**In order to process this request, all fields below are required to be completed (fax and e-mail are optional fields)**

Agency Name:

Is this a law enforcement agency?  Yes  No

Requestor's First Name:

Requestor's Last Name:

Requestor's Title:

Address:

City/State/Zip + 4:

Telephone Number:

Fax Number:

E-Mail Address:

15. NAME, TITLE, AND SIGNATURE OF SUPERVISOR AUTHORIZING MAIL COVER REQUEST:

Supervisor's First Name

Supervisor's Last Name

Supervisor's Title

Supervisor's Address:

Supervisor's City/State/Zip + 4:

Supervisor's Telephone Number:

Supervisor's Signature and Date: \_\_\_\_\_

**AN ELECTRONIC VERSION OF THIS FORM IS AVAILABLE UPON REQUEST BY CONTACTING THE MAIL COVERS UNIT AT 312-669-5673.**

**AS INFORMATION, ALL COMPLETED MAIL COVER REQUESTS WILL NEED TO BE SENT VIA THE UNITED STATES MAIL TO THE CRIMINAL INVESTIGATIONS SERVICE CENTER PER INSTRUCTIONS AT THE TOP OF THE FIRST PAGE OF THIS TEMPLATE.**

*(For CISC Internal Use Only)*

Reviewer's Initials & Date: \_\_\_\_\_