



NC Department of Adult Correction Victim Support Services

Victim Notification Request Form

PERSON / ORGANIZATION REQUESTING NOTIFICATION ABOUT AN OFFENDER

First: _____ Middle Initial: _____ Last: _____ Suffix: _____
Business/Organization: _____
Mailing Address: _____ Home Phone (_____) _____
City: _____ State: _____ Zip Code: _____ Work Phone (_____) _____
County: _____ Email: _____ Cell Phone (_____) _____

PROVIDE A 4 DIGIT PIN* OF YOUR CHOICE & SELECT HOW YOU WOULD LIKE TO BE NOTIFIED

Choose your notification method below. Please note that if you are registering to receive notifications about state prisoners and probationers, you will receive notifications by mail and by the methods you choose below.

WRITE your PIN here: Create a *PIN (Personal Identification Number) that is four numbers

- Phone indicate: home and/or cell (Do not register a work number without the employer's permission. The NC SAVAN system will continue to call until the PIN is entered.)
- Text
- Email
- Spanish option for phone/text/email. Letters will remain in English

YOUR RELATIONSHIP TO THE VICTIM

Please check the appropriate box to indicate how you are related to the victim in this case.

I am:

- a direct victim of this crime
- a family member of the victim
- an interested party

VICTIM INFORMATION

- Please check if the victim of this crime is under the age of 18.
- Please check if the victim of this crime is deceased.

First: _____ Middle Initial: _____ Last: _____ Suffix: _____

OFFENDER INFORMATION

Offender is: in a county jail in a state prison on parole on probation/post-release supervision unknown

First: _____ Middle Initial: _____ Last: _____ Suffix: _____

Offender's County Jail # or NCDPS #: _____ County of Conviction: _____

Crime(s): _____

Court Case #(s): _____

SEND THIS FORM TO

By Fax: 919-715-1256 **By Email:** SVC [DAC_victimservices@dac.nc.gov](mailto:victimservices@dac.nc.gov) **By Mail:** NC Dept. of Adult Correction
Victim Support Services
4223 Mail Service Center
Raleigh, NC 27699-4223

For victim services questions: Victim Support Services 1-866-719-0108, Monday-Friday, 8am-5pm

For operator assistance with phone, email, text or TTY notifications: 1-877-627-2826, 24 hours/day

For web information: www.dac.nc.gov