

VERMONT FORENSIC LABORATORY
PO BOX 47
WATERBURY, VERMONT 05676-0047
TEL: 802-244-8788
FAX: 802-241-5557
<http://vfl.vermont.gov>



LAB USE ONLY
VFL#

**REQUEST FOR ANALYSIS OF EVIDENCE COLLECTED IN REGARD TO
CIVIL VIOLATION OF POSSESSION OF MARIJUANA**

Please read and comply with all instructions.

1. This is a request that the evidence collected in connection with your citation be analyzed for the presence of cannabinoids.
2. Please enclose a check in the amount of **\$100 (one hundred dollars)** payable to the **Vermont Department of Public Safety** to cover the costs of testing and handling the sample. If the material is negative for the presence of cannabinoids, you will not be charged and your check will be returned.
3. The Vermont Forensic Laboratory will analyze the material submitted and report the results to you or your attorney as directed below. The request must be received with documentation demonstrating that the request has been made in accordance with 18 VSA 4230a (d).
4. **If this request for analysis is submitted through an attorney, the attorney's signature must be included.** The attorney's signature certifies he/she is representing the individual.
5. Enclose a copy of the citation.

Please *Print* All Information:

Individual's Name (print) _____
Date of Citation: ___ / ___ / ___ Agency filing citation _____
Individual's Mailing Address: _____
Daytime Telephone Number: _____
Email Address: _____
Attorney's Name (if applicable): _____
Attorney's Mailing Address: _____
Attorney's Telephone Number: _____
Attorney's Email Address: _____

Individual's signature and date

Attorney's signature and date

The results of the laboratory analysis should be sent to:

Your address as shown above

Your Attorney's address as shown above

MAIL THIS COMPLETED FORM AND YOUR CHECK TO:

Vermont Forensic Laboratory
PO Box 47
Waterbury, VT 05676-0047
ATTN: MJ Civil Violation Program

If you have any questions or comments about this process you may call (802) 244-8788.