



Montgomery County Department of Public Safety

CLEAN/NCIC CANCELLATION - PERSON Form

Police Department	Requesting Officer

DETAINER				DETAINER CASE NUMBER:		REQUIRED		
ORI	REQUIRED	NAME	REQUIRED	NIC	Must Have NIC	OCA	Or OCA	CANCEL DATE
								REQUIRED

IDENTITY THEFT								
ORI	REQUIRED	NAME	REQUIRED	NIC	Must Have NIC	OCA	Or OCA	CANCEL DATE
								REQUIRED

MISSING PERSON				Choose One:				
ORI	REQUIRED	NAME	REQUIRED	NIC	Must Have NIC	OCA	Or OCA	CANCEL DATE
								REQUIRED

WANTED PERSON		WANTED PERSON			TEMPORARY FELON			
ORI	REQUIRED	NAME	REQUIRED	NIC	Must Have NIC	OCA	Or OCA	CANCEL DATE
								REQUIRED

CASE USE ONLY					
Dispatcher Initials / Number		Date/Time	Checked By Initials / Number		Date/Time

Print Legibly or Type All Information

Fax to 610-631-6539

(Form CXPEN- Revision 201807.5)