Attention!

**The *State Property Incident Report* (SBI-78), which follows, is the only form the SBI will accept for the reporting of lost, stolen, damaged, or misused state property. Due to filing requirements, it is preferred the completed *State Property Incident Reports* NOT be forwarded to us by fax.**

**Send completed reports to: State Property Incident Reports**, NC State Bureau of Investigation,

3320 Garner, Road, P.O. Box 29500, Raleigh, NC 27626-0500 /

**Or by** **E-Mail:** [statepropertyreports@ncsbi.gov](mailto:statepropertyreports@ncsbi.gov)

All reports **must** be submitted to the head of your agency or the agency’s assigned designee for review and submission to NCSBI.

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| **Quick Tips** | |
| **Leave Blank** | Leave the Agency Head/Designee Signature, Date, & Address blocks blank **UNLESS** you are the agency head/designee. |
| **Attachments** | Police reports/additional documentation. |
| **Recovered Amount** | If applicable, enter the value amount of the item(s) recovered. |
| **Incident Description** | Give a brief overview of events Note resolution or outcome. |
| **Law Enforcement contact** | Note any notification reported, including Warrants. |

**(FOR NCDPS AGENCIES ONLY)**

**E-mail completed reports to:** [**statepropertyincidentreports@ncdps.gov**](mailto:statepropertyincidentreports@ncdps.gov)

*PLEASE DO* ***NOT*** *SIGN AS DEPARTMENT HEAD/DESIGNEE AND DO NOT COMPLETE THE DATE, & ADDRESS BLOCKS. EACH SHOULD BE LEFT BLANK.*

Please submit all completed reports as a word document or PDF file. If applicable, any attachments (Police reports or additional documentation) should be faxed to 919-716-3923.

Questions: Call Internal Audit at 919-733-4080

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| **Quick Tips** | | |
| **Leave Blank** | On the SBI-78 Leave the following 3 blocks blank: | Department Head/Designee Signature, Date, & Address blocks. |
| **Attachments** | Fax to 919-716-3923 | Police reports/additional documentation. |
| **DPS assets** | Report any loss, damage or misuse | As soon as possible after knowledge of incident. |
| **Canteen shortages** | Report any shortage  $100 above tolerance | Page 2 value will be total loss amount (including tolerance amount) |
| Note shortage as “Canteen Inventory” and/or “Cash” | Do not list each missing canteen item on page 2. |
| **Incident Description** | Give a brief overview of events | Note resolution or outcome. |
| **Law Enforcement contact** | Note any notification reported, including Warrants | Fax documentation once received. |

For use by designated NC State Agency department heads or designees to report to the Director of the State Bureau of Investigation information or evidence of any arson, attempted arson, damage to, theft of, embezzlement from, or misuse of any State owned personal

**STATE PROPERTY INCIDENT REPORT**

property, buildings or other real property in accordance to **NCGS § 143B 920**.

***SUBMISSION INSTRUCTIONS:***

This report **MUST** be forwarded to your agency’s head or appointed designee for submission to SBI.

**Agency Head/Designee please send reports to:**

State Property Incident Reports, NC State Bureau of Investigation,

3320 Garner, Road, P.O. Box 29500, Raleigh, NC 27626-0500 **or** [statepropertyreports@ncsbi.gov](mailto:statepropertyreports@ncsbi.gov)

**(For NCDPS Agencies Only):** [**statepropertyincidentreports@ncdps.gov**](mailto:statepropertyincidentreports@ncdps.gov)

***\*\*THIS FORM MUST BE SIGNED AND SUBMITTED BY YOUR AGENCY HEAD OR ASSIGNED AGENCY DESIGNEE.***

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| DEPARTMENT: | | | |
| DIVISION, INSTITUTION, OR AGENCY: | | | |
| ADDRESS: | | TELEPHONE: | |
| EMPLOYEE REPORTING INCIDENT: | | | |
| INCIDENT TYPE:  ARSON  DAMAGE  EMBEZZLEMENT  THEFT  MISUSE | | | |
| PROPERTY INVOLVED: | | | |
| DATE OF INCIDENT: | TIME OF INCIDENT: | | |
| NC COUNTY AND CITY: | | | |
| IF REPORTED TO LOCAL LAW ENFORCEMENT DEPARTMENT, PROVIDE AGENCY NAME AND ATTACHE POLICE INCIDENT REPORT:  IF NOT REPORTED, WHY NOT:  MONEY/PROPERTY RECOVERED  ADMINISTRATIVE ACTION TAKEN  NOT A CRIME OTHER: | | | |
| BRIEF DESCRIPTION OF INCIDENT: | | | |
| **LIST STOLEN OR DAMAGED ITEMS AND VALUE ON REVERSE SIDE** | | | |
| SUSPECT(S):  EMPLOYEE  STUDENT  CONTRACT WORKER  NON-EMPLOYEE  UNKNOWN | | | |
| AGENCY HEAD / DESIGNEE: (SIGNATURE & TITLE) | | | DATE: |
| ADDRESS: | | | |

**\*\* ALL FIELDS ARE** **MANDATORY**

**STATE PROPERTY INCIDENT REPORT**

**RECOVERY KEY**

**R** –Recovered in value / **D** – Destroyed / **U** – Unrecoverable / **N/A** – Not Applicable

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| **Qty** | **Item** | **FAS #** | **Serial #** | **Model #** | **Total Loss Value** | **Recovery Key** |
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| **TOTAL VALUE** | | | | |  | |

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| **FOR SBI USE ONLY** | REFERENCE #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| SBI FILE #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | REPORT RECEIVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **ASSIGNED**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District for investigation and/or appropriate action | | |
| **FILED:** (Investigation handled by local department) | | |
| **OTHER:**  (Handled Administratively by State Agency) |  | |
| ASSISTANT DIRECTOR: | | DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |