REQUEST FOR INVESTIGATOR

NORTH DAKOTA COMMISSION ON LEGAL COUNSEL FOR INDIGENTS

SFN 62659 (10-2026)

NDCLCI
300 2nd Avenue NE, Suite 212
Jamestown, ND 58401
Phone: (701) 845-8632
Email: clcivc@nd.gov

Requesting Office	Name of Attorney Making Request	Date

Client Name (First, Middle, Last)(Alias)			County of Case
Address	City	State	ZIP Code
Telephone Number	Email Address		

Is client Incarcerated
☐ No ☐ Yes - **see below**

Correctional Facility	DOC Number

Case Number	Offense	Severity
Case Number	Offense	Severity

Explanation for Request (include specific details of needs, witness/victim names and contact info)

Attorney Signature	Date

Submit to clcivc@nd.gov

FOR OFFICE USE ONLY

Request is
◯ Granted ◯ Denied

Signature of Lead Counsel/Commission Personnel	Date

Investigator Assigned	Date