

JDF 417	to Seal Arrest and Criminal Records No Charges Filed – C.R.S. § 24-72-704	
A. Court Type: (ex: County or District) Colorado County: Court Address:		<i>Existing Case Event Code: MTSL</i> <i>New Case Event Code: PTSR</i> <i>This box is for court use only.</i>
B. Parties to the Case Petitioner (or Defendant):		
		C. Case Details Number: Division/Courtroom:

1. My Information

Name

Date of Birth:

Mailing Address:

City, State, & Zip:

Phone:

Email:

Do you need an interpreter?

☐ No

☐ Yes, in *(language)*

I want to attend court events:

☐ In-person

☐ Virtually *(by phone or web video)*

To switch your choice:

Use form *JDF 76 – General Motion*. File at least 48 hours before an event.

2. I am ... *(check only one)*

☐ The Person in Interest. I'm the primary subject of the criminal justice records.

☐ The designated representative of the Person in Interest, by power of attorney or notarized authorization.

☐ The parent of the Person in Interest, if the Person in Interest is under legal disability.

☐ The appointed legal representative of the Person in Interest, if the Person in Interest is under legal disability.

If you are not the person in interest, enter their information below:

Name:

Date of Birth:

Mailing Address:

Phone:

3. Records to be Sealed

I request that the following conviction records be sealed:

☐ Prosecuting Attorney

☐ Sheriff's Department

Mailing Address:

☐ Colorado Bureau of Investigation **(Required)**

ATTN Identification-Seals, 690 Kipling St., STE 3000, Lakewood, CO 80215

☐ Law Enforcement: (Agency Name)

Agency Mailing Address:

Agency Case Number:

☐ Other: (name)

Mailing Address:

Arrest/Summons Number: (from fingerprint card)

Date of Arrest/Summons:

4. Offenses

a) List of Offenses

List the offenses or charges listed in the criminal records to be sealed:

Listed Offense

**Misdemeanor
or Felony**

- b) Were charges ever filed in court? *(yes or no)*
- c) Did you successfully complete a diversion agreement? *(yes or no)*
- d) Has the statute of limitations passed on all these charges? *(yes or no)*
- e) Are you still being investigated for these charges? *(yes or no)*

5. Certificate of Service

On *(enter service date)*

I certify that I sent a copy of this document to all the agencies I checked in Section 3 by:

- ☐ Colorado Courts E-Filing. *(only available to lawyers)*
- ☐ Regular Mail, using the addresses entered in Section 3.
- ☐ Other: *(explain)*

6. Sign & Date

I request a hearing to present my request, and for an order sealing the arrest and criminal records I listed above, pursuant to C.R.S. § 24-72-704(1)(c)(II).

Print Your Name:

Signature:

Date:

Counsel Signature: *(if any)*