



Arizona Department of Public Safety
Noncriminal Justice Agency Information Change Form

Date	Agency Name	Agency OCA ("XX" identifier)	
Change/Add Contact Type: Check all that apply Agency Security Contact (ASC) <input type="checkbox"/> Applicant Team <input type="checkbox"/> Secondary ASC <input type="checkbox"/>	<i>Previous Contact</i>		
	New Contact Information		
	Title	Name	
	Phone	Fax	Email
Change CEO	<i>Previous CEO Name</i>		
	New CEO Information		
	Title	Name	
	Phone	Fax	Email
Change Address Type: Physical <input type="checkbox"/> Mailing <input type="checkbox"/> Both <input type="checkbox"/>	Address Line 1		
	Address Line 2		
	City	State	Zip
Change Agency Name Previous Name: New Name:		Change Agency Main Phone New phone number:	
Additional Comments/Information:			Leave Blank – AIU use only
Name and Title of Person Submitting Form (Please Print Legibly):			

Send completed form to:

Arizona Department of Public Safety
 Access Integrity Unit
 ATTN: Noncriminal Justice Compliance
 P.O. Box 6638 | MD 3160
 Phoenix, AZ 85005-6638

OR

Fax: (602) 223-2926
 ATTN: AIU Noncriminal Justice Compliance
 Email: NCJA@azdps.gov