



**Office of the Special Narcotics  
Prosecutor for the City Of New York  
Conviction Review Committee**

**APPLICATION TO BE COMPLETED BY INDIVIDUAL SEEKING  
REVIEW OF PRIOR SNC CONVICTION IN NEW YORK CITY**

The Conviction Review Committee of the Office of the Special Narcotics Prosecutor of City of New York (“CRC”) will review innocence claims, wrongful conviction challenges and requests for equitable relief in the interest of justice relating to convictions submitted to our office that meet the following criteria:

1. All claims must be based on facts (not a contestable legal issue) and non-frivolous.
2. The claimant must assert that he or she did not commit the crime of which he or she stands convicted or that said conviction is not consistent with the interest of justice.
3. The claimant must identify new, credible, material facts that are capable of being investigated and substantiated.
4. Case records necessary for re-investigation must be available for review.
5. CRC inquiries are non-adversarial and cooperative processes.
6. Absent extraordinary circumstances, the CIC will not consider any request where the claimant currently has other legal process underway (such as a habeas petition or a civil lawsuit).

**If you believe you are innocent of a crime for which you have been convicted, or that you have been wrongfully convicted of an offense, or your conviction is inconsistent with the interest of justice, and your case was prosecuted by the Office of the Special Narcotics Prosecutor, and your claims meet the above criteria, and you would like the CRC to review your innocence claim, please complete and submit the following application.**

## SUBMISSION FORM / REQUEST FOR REVIEW

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

INMATE NUMBER: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

CURRENT EMAIL: \_\_\_\_\_

DATE OF CONVICTION(S): \_\_\_\_\_

CASE NUMBER OF CONVICTION TO BE REVIEWED: \_\_\_\_\_

**Please return this application to:**

**CRC@snp.nyc.gov**

**OR MAIL TO**

ATT: Conviction Review Committee  
Special Narcotics Prosecutor's Office  
80 Centre Street  
New York, NY 10013

**Please complete this submission form as fully as possible. If you do not know the answer to a question, you may leave it blank.**

**CONSENT FORM**

<b>The petitioner must agree to all of the following and indicate such agreement by initialing to the right of each statement.</b>	
<b>Statements</b>	<b>Initials of Petitioner</b>
1. I certify that all of the statements in this application are true and accurate.	
2. I understand that I have no right to a CRC review, and that there is no right of appeal from rejection by the CRC.	
3. I understand that CRC investigations are non-adversarial and cooperative processes.	
4. I understand that the CRC is not my attorney, and <b>I should not share confidential or privileged information with the CRC.</b>	
5. I did not commit the crime(s) for which I was convicted.	
6. I know of new, credible, material facts that are capable of being investigated and substantiated.	
7. I am requesting that the CRC review my claim of innocence.	
8. I am willing to cooperate with the CRC's investigation. <sup>8</sup>	
9. I understand that the CRC may determine that my case does not meet its criteria and at any point reject my application.	
10. I understand that my request for the CRC to review my case is not an appeal.	

11. Other than this claim, I do not have any legal proceedings underway relating to this conviction.	
12. I understand that sending this application to the CRC <b>will not</b> extend any court's legal deadlines, including the Statute of Limitations for filing a federal habeas petition.	

The prosecutors serving on the CRC at the Special Narcotics Prosecutor's Office do not represent you and cannot offer you legal advice. A prosecutor cannot legally or ethically be your attorney. **You should not share any confidential or privileged information with the CRC.** If you do not understand any of the above, you should consult an attorney before submitting this form.

**I have read and understand all of the above statements. By initialing the statements and signing below, I understand and agree to comply with any terms herein. No one has told me to agree to anything that I oppose or do not understand. My agreements are of my own free will and are given voluntarily.**

DATE: \_\_\_\_\_ NAME (PRINT): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**ONCE SIGNED, PLEASE PROCEED TO THE NEXT PAGE.**

1. Do you have a lawyer?  **Yes**  **No**

If so, please provide your lawyer's name, address, and phone number.

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2. What is your first language? If English is not your first language, do you have any difficulties reading and writing in English?

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3. What is the highest grade you completed in school?

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4. Is there any reason that corresponding in writing will be difficult for you?  **Yes**  **No**

If yes, please explain.

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5. Have you ever received mental health treatment?  **Yes**  **No**

If yes, please describe if it affects your ability to complete this form.

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6. Is anyone assisting you in completing this form?  **Yes**  **No**

If yes, please identify that person and explain why.

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7. Please provide the names, addresses, phone numbers and email addresses of family or friends who might have information regarding your case. *By writing these names, you are giving us permission to talk to them about your case.*

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8. Have you filed a direct appeal of your conviction(s)?  **Yes**  **No**

If yes, please provide the docket number, date of any decision, and result of your appeal?

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9. Have you filed a federal habeas petition to challenge your conviction(s)?  **Yes**  **No**

If yes, please provide the docket number, date of any decision, and result of your habeas petition?

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10. Are you claiming that, based only on the facts and not on any legal arguments, you are **actually innocent**, meaning that you did not commit the crime(s) for which you were convicted? (**Note:** The CRC generally will not review claims of self-defense or insanity, which are legal arguments and not actual innocence claims.)

Yes  No

If yes, please provide as much information as possible and describe the facts and reasons you are innocent of the crime(s) for which you were convicted (feel free to attach additional sheets of paper):

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11. What new, credible, material facts or information can be investigated and substantiated that support your claim that you are innocent, in other words, that you did not commit the crime(s) for which you were convicted? (Feel free to attach additional sheets of paper).

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12. Please identify any witnesses who have new, credible, material information relevant to your claim that, based on the facts, you are innocent.

*(Please provide information about additional witnesses on a separate, attached page.)*

**Witness #1:**

Address, phone number and email (if available):

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What information does this person know?

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**Witness #2:**

Address, phone number and email (if available):

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What information does this person know?

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**Witness #3:**

Address, phone number and email (if available):

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What information does this person know?

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**I affirm that I have been truthful in answering the questions in this form.**

Date: \_\_\_\_\_ Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_