Government of South Australia
Attorney-General's Department

Forensic Science SA

GPO Box 2790
Adelaide SA 5001
Tel: +61 8 8226 7700
Fax: +61 8 8226 7777

Email: FSSA@sa.gov.au

Request for Reissue of Certificate of Analysis

1. Sample Details

Sample number	
Hospital / Medical Centre	
Date of sample collection	

2. Requesting Persons Details

First name(s)			
Family name			
Mailing address		State	
		Postcode	
Phone			
Email			

3. Request

Indicate your request	☐ Reissue - Certificate of Analysis for Blood ☐ Reissue - Certificate of Analysis for Oral Fluid

4. Payment

Please be advised a fee of **$100.00** (incl. GST) is payable upfront to reissue the Certificate of Analysis.

You must send the EFT remittance or receipt together with you application when payment has been completed. This can be a screenshot or pdf document.

A Certificate of Analysis will not be posted until payment is verified. See payment options below.

Electronic Funds Transfer (EFT)

Forensic Science SA

BSB: 015-101

Account: 838539341

Reference: **{Sample ID/Surname}**

Credit Card Payment:

https://forms.sa.gov.au/#/form/65724cdf717433b7272f9c4a

Forensic Science SA

Reference: **{Sample ID/Surname}**

Alternatively, please call and speak with the Finance Officer on 08 8226 7700 to complete payment over the phone.

5. Supporting Evidence

You will need to provide evidence to support your request.

A minimum of 3 identifiers are required: -

- Sample Number
- Name
- Address
- Date sample was taken
- Where the sample was taken

☐ Proof of payment (You must attach a screenshot or pdf of your payment receipt)

You can send your completed *Request for Reissue of Certificate of Analysis* form and supporting evidence to Forensic Science SA by:

Email	OR	**Post**
FSSA@sa.gov.au		Administration Manager Forensic Science SA GPO Box 2790 Adelaide SA 5001

6. Declaration

The declaration is to be completed by the applicant.

I, _____

(Insert full name – must be the person who the sample was collected from)

declare that all information I have provided in this *Request for Reissue of Certificate of Analysis* form is true and correct.

I make this declaration conscientiously believing the same to be true.

Signature	
Date	

7. Checklist

All relevant sections of this form have been completed.	☐ Yes ☐ No
EFT Remittance or Receipt advising of payment if applicable.	☐ Yes ☐ No
The **declaration** has been completed and signed.	☐ Yes ☐ No

Note: Please ensure you add FORENSICAdministration@sa.gov.au to your safe senders list or check your junk mail folder for any expected replies.

Office Use Only		
Received Date		
Documents Received		
Received By		
Payment Received ☐	Update RADDS ☐	Certificate Sent ☐