

DIVISION OF ADULT INSTITUTIONS
CALIFORNIA SUBSTANCE ABUSE TREATMENT FACILITY AND
STATE PRISON-CORCORAN
900 QUEBEC AVENUE, P.O. BOX 7100
CORCORAN, CA 93212



To Whom It May Concern:

You recently inquired about the information requirements needed to schedule an Attorney Visit. Please be advised of the following information.

The California Code of Regulations, Title 15, Section 3178(d) states the following:

An attorney who wishes to consult in person with an inmate shall contact the institution/facility at which the inmate is housed. The request shall be made by calling or writing (including via facsimile) the staff designated (usually the litigation coordinator) in the institution/facility operational supplement. In order to obtain approval/clearance, the attorney shall provide the following personal and professional information in writing (including via facsimile): name; mailing address; date of birth, valid driver's license or state-issued identification card number; proof of current registry and good standing with a governing bar association; and indication of the jurisdiction(s) licensed to practice law. Requesting attorneys must also report any prior felony convictions, explain any prior suspension or exclusion from a correctional facility and declare one or more of the following:

- (1) They are the inmate's attorney either by appointment, by the court or at the inmate's request;*
- (2) They have been requested by a judge to interview a named inmate for purposes of possible appointment as counsel by the same court;*
- (3) They are requesting to visit an inmate who may be a witness directly relevant to a legal process, purpose, or proceeding;*
- (4) They are seeking to interview a named inmate, at the request of the inmate, for the purpose of representation of the inmate in a legal process, for a legal purpose or in a legal proceeding.*
- (5) They have been requested by a third party to consult with the inmate when the inmate cannot do so because of a medical condition, disability, or other circumstance.*

For persons working on behalf of an attorney, i.e. investigators, paralegals, etc., the information listed below is also required **in addition to the attorney information required in the questionnaire**. For example, on his/her letterhead stationary, signed by the attorney, a declaration that the person is sponsored by the attorney and accepts responsibility for all their actions.

The California Code of Regulations, Title 15, Section 3178(c) states the following:

An attorney or court may designate other persons to act on their behalf as attorney representatives.

(1) Attorney representatives must be one of the following:

- (A) A private investigator licensed by any state and sponsored by the attorney or appointed by the court.*
- (B) An investigator who is employed by a government agency, public agency or public institution.*
- (C) A law student sponsored by the attorney.*
- (D) A legal para-professional sponsored by the attorney or appointed by the court.*
- (E) An employee of an attorney, legitimate legal service organization, or licensed private investigator that is sponsored by the attorney or licensed private investigator.*

(2) Personnel retained by an attorney or attorney representative, including, but not limited to certified sign language interpreters, certified language interpreters and court reporters may accompany the attorney or attorney representative during the private consultation and are required to provide the information requested in (c)(3) below. Licensed mental or medical health care professionals may also serve as attorney representatives and do not have to be accompanied by the attorney.

(3) The designation shall be in writing and signed by the attorney and/or judge, and shall contain the following:

- (A) *The designee's name and position of employment or Title.*
- (B) *The designee's date of birth, driver's license and social security number.*
- (C) *Certification, in the form of a license that the representative is a licensed private investigator retained by the attorney or appointed by the court; or valid identification that the investigator is employed by a government agency, public agency, or public institution; or a letter in the form of a declaration, that the attorney representative is being sponsored by the attorney and that the attorney accepts responsibility for all actions taken by the attorney representative.*

VISITING RULES AND REGULATIONS

All visitors must adhere to the following rules & regulations. Failure to comply may result in the termination of a visit or suspension/denial of future visits. No chemical agents, [i.e. Mace, Pepper Spray, OC Spray, or any personal protection devices allowed]. No weapons, knives, detonation devices or firearms are to be brought onto institutional grounds. Violators are subject to criminal prosecution for non-compliance. All visitors will be required to pass through a metal detector before entering the visiting area. Additional searching may be required

Visitors must have one of the following acceptable forms of identification for visitation [no laminated form of I.D. will be accepted, unless noted. Laminated or altered forms of I.D. will automatically disqualify a visit.]:

- Valid Driver's License with picture [not laminated].
- Valid Federal Passport with picture and I-94 card.
- Armed Forces identification card with picture. [Laminated approved if not altered and in original condition.]
- Cards issued by the United States Department of Justice – Immigration and Naturalization Service.
- Picture identification Matricula Consular De Alta Seguridad [MCAS] issued by the Mexican Consulate not laminated.

In addition to the above listed forms of identification, attorneys shall also present their state bar card or other similar documentation that the attorney is currently registered in good standing with the state bar association. [CCR, Title 15, Section 3178 (h)]

THE CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION IS NOT RESPONSIBLE FOR LOST ITEMS

ALLOWABLE ITEMS FOR ATTORNEY VISITORS IN VISITING ROOMS:

- One [1] valid picture I.D.
- One [1] pair eyeglasses. No sunglasses or detachable sunglasses allowed.
- One [1] handkerchief, [white only] or small package of unopened tissue, no bandannas.
- One [1] comb and/or hairbrush. No metal, no pointed ends or detachable parts.
- Two [2] car keys on ring with no alarms, remotes or flip keys.
- Thirty dollars [\$30.00] per adult, in coins or one dollar [\$1.00] bills only [\$5, 10, 20, etc. not allowed].
- Legal documents and materials.
- Prescription medications and all prosthetic or metal implants must have doctor's verification. Medications not necessary for life sustaining, condition-stabilizing, purposes will not be permitted. Heart patients may retain Nitroglycerin in their possession [only the amount that would be immediately required]. If a prescription medication is required, the visitor will only be allowed to take the amount needed during a visit. All prescription medication, except inhalers and nitroglycerin, will be given to the staff in the visiting room and issued to the visitor as needed.

JEWELRY: [ALL ALLOWABLE JEWELRY WILL BE LOGGED ON THE REVERSE SIDE OF THE CDC 1000, YELLOW COPY OF THE VISITOR'S PASS]

- One [1] wedding set/wedding band/one wedding ring [not in combination].
- One [1] pair of earrings.
- One [1] bracelet.
- One [1] watch.
- One [1] necklace or religious medal with chain.
- One [1] ankle bracelet.

VISITOR'S ATTIRE: [VISITORS SHALL ADHERE TO THE FOLLOWING BASIC DRESS STANDARDS, WHICH WILL BE DETERMINED AT VISITING STAFF'S DISCRETION]

- Visitors shall be fully clothed at all times.
- Appropriate attire includes undergarments; a dress or blouse/shirt with skirt/pants or shorts; and shoes or sandals.
- Under wire bras are not permitted.
- All shorts, skirts and dresses, including slits in the garment shall not expose more than two [2] inches above the knee when standing.
- Buttons, snaps and zippers shall remain fastened.

PROHIBITED CLOTHING/ ITEMS [NO EXCEPTIONS]:

- No clothing that resembles State-issued inmate clothing [blue denim or light blue chambray shirts and blue denim pants, reception center attire].
- No clothing that resembles law enforcement or military-type clothing [cargo pants black or green, forest green, tan shirts or camouflage-patterned articles of clothing including rain gear].
- No clothing or garments that expose the breast/chest area, midriff, genitals or buttocks.
- No clothing or garments that: by design, the manner worn, or due to the absence of, excessively allows the anatomical detail of body parts or midriff to be clearly viewed.
- No clothing that is sheer, transparent or excessively tight; or exposes more than two inches above the knee, including slits when standing.
- No clothing or accessories displaying obscene or offensive language, drawings or objects.
- No gloves, head coverings [except clear, see-through rain gear], and readily removable wigs or hairpieces. Written approval shall be required prior to visiting and subject to staff inspection during any visit.
- No hats or headgear, except those with established religious significance, these items will be searched.
- No scarves/headbands or bandannas. No exceptions.
- No yellow or green rain jackets/ rain slickers allowed.
- **Strapless**, or halter garments, **spaghetti straps** or bare midriff clothing, **tank tops/sling shot shirts** are not allowed to enter the institution.
- No layering of clothing.
- No clothing that resembles medical scrubs.
- No chewing gum, candy or snacks can be taken inside the visiting room.
- No writing materials or books, unless approved prior to entering the visiting room.
- No wallets or purses, other than small, clear, unlined plastic purses.
- No matches or lighters allowed.
- No cellular phones or paging devices.
- No cameras allowed.

PARKING:

All visitors are to park in the visitor parking lot. Parking in any other area is prohibited and subject to towing. Persons are not allowed to wait in their vehicles and are directed to wait in the Friends Outside trailer, operated by Friends Outside, a non-profit organization. Visitors are not allowed on institutional grounds prior to 0730 hours on scheduled visiting days.

VISITING DAYS AND HOURS:

Fridays / Saturdays / Sundays / Mondays / Holidays: 8:00 AM – 3:00 PM

VISITING HOLIDAYS:

* Fourth of July * Labor Day * Thanksgiving * Christmas * New Years

For your convenience, I have included a Security Clearance form and Attorney Declaration. Please complete these forms, and submit a written request on your business letterhead and fax or mail them to the Litigation Unit.

If the information you send is incomplete, the Litigation Unit will contact you. If it is complete, we will conduct a verification of the attorney's or other sponsored visitor's credentials through the governing State Bar or Consumer Affairs then conduct a California Law Enforcement Telecommunications System check through the Department of Justice. We ask for at least five business days notice to schedule an attorney visit. Once the clearance and credentials have been obtained and approved, you will be contacted by the Litigation Unit to schedule the Attorney Visit.

If you have not been contacted in two business days, or have questions regarding your request, please call.

Telephone numbers of the Litigation Unit:

Litigation Coordinator	(559) 992-7206
Litigation Assistant	(559) 992-7100 extension 5626
Litigation Unit Fax	(559) 992-7191

J.P. BARBA
Litigation Coordinator
California Substance Abuse Treatment Facility and State Prison

ATTORNEY'S DECLARATION:

I declare (**check and initial** all that apply)

- _____ I am the inmate's attorney at his request.
- _____ I am the inmate's attorney by appointment of the court.
- _____ I have been requested by a judge to interview the inmate for purposes of possible appointment as council by the same court.
- _____ I am requesting to visit an inmate who may be a witness directly relevant to a legal process, purpose, or proceeding.
- _____ I am seeking to interview a named inmate, at the request of the inmate, for the purpose of representation of the inmate in a legal process, for a legal purpose or in a legal proceeding.
- _____ I have been requested by a third party to consult with the inmate when the inmate cannot do so because of a medical condition, disability, or other circumstance.
- _____ I am designating the following private investigator to assist or act on my behalf. (PI must provide valid copy of PI license/identification. [CCR Title 15, Section 3178 (c) (3) (C)])

NAME OF LICENSED PI (AS IT APPEARS ON LICENSE)

PI LICENSE NUMBER

- _____ I am designating or sponsoring the following person(s) to assist or act on my behalf, and accept responsibility for all their actions while on institutional grounds. [CCR Title 15, Section 3178 (c) (3) (C)]

I understand that any false statement or deliberate misrepresentation of facts specific to the information requested above shall be grounds for denying the request and/or cause for subsequent suspension or exclusion from all institutions/facilities administered by the department.

Requesting Attorney's Name

Attorney's Signature

Date

**CALIFORNIA SUBSTANCE ABUSE TREATMENT FACILITY AND STATE PRISON AT CORCORAN
SECURITY CLEARANCE FORM
ATTORNEY / PRIVATE INVESTIGATOR / COURT REPORTER**

NAME: _____ MALE: FEMALE:
LAST FIRST INITIAL

ALIAS OR MAIDEN NAME: _____

REQUESTED DATE OF VISIT: _____ INMATE: _____ CDC#: _____

HEIGHT: _____ DRIVER'S LICENSE #: _____ STATE: _____

WEIGHT: _____ SOCIAL SECURITY #: _____
(SSN OPTIONAL; HOWEVER, EXCLUDING IT MAY DELAY PROCESSING)

HAIR: _____ STATE BAR #: _____ STATE: _____

EYES: _____

RACE: _____ PURPOSE OF VISIT: _____

BIRTH DATE: _____ LENGTH OF VISIT: _____

NAME OF EMPLOYER: _____

ADDRESS: _____
STREET CITY STATE ZIP

TELEPHONE #: _____ OCCUPATION: _____

IDENTIFYING MARKS/SCARS: _____

- Have you ever been arrested? .. Yes: No:
- Are you now on probation or parole? . Yes: No:
- Do you know or are you related to any inmates or parolee? Yes: No:
- Do you visit any other CDC facilities? Yes: No:

IF YOU ANSWERED YES TO ANY OF THESE QUESTIONS, PLEASE EXPLAIN ON SEPARATE SHEET OF PAPER.

The following are some of the rules and regulations enforced within this institution:

- NO visitor will carry, convey, or make accessible to any inmate within the institution any intoxicant, drug, firearm, weapon or any other contraband articles.
- NO visitor is permitted to carry/convey messages, written or oral without permission from the institution.
- NO visitor is permitted to give/receive article, gift, food, or money to or from inmates without permission.
- NO blue, black, green, tan or gray jeans/denim allowed; must have a current valid California Driver's License or picture I.D. card.
- Briefcases are not allowed. Bring only paperwork related to the specific case you are here to investigate/interview for.

**I HAVE READ THE ABOVE RULES AND AGREE TO COMPLY.
I UNDERSTAND THAT I AM SUBJECT TO A SEARCH AT ANY TIME.**

APPLICANT SIGNATURE DATE

Approved / Disapproved: _____
VISITING LIEUTENANT/ LITIGATION COORDINATOR DATE

06/07 EXPIRATION DATE: _____