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**PUBLIC AREA CCTV**

**INITIAL VIEWING REQUEST AND DISC RELEASE FORM**

<b>Investigating Officer / officer requesting viewing</b>			
<b>Service Number</b>			
<b>Contact Address</b>			
<b>Contact Number</b>			
<b>Date and Time of Incident</b>	<b>Start</b>	<b>End</b>	
<b>Location of Incident</b>			
<b>Nature of Incident</b>			
<b>Reason for request e.g.</b>			
<b>Court Evidence gathering etc</b>	(if disc is to be used for identification, refer to force order 40/94 C(e) )		
<b>Signature of requestee</b>		<b>Date</b>	
<b>Disc reference number</b>			
Fill in below all additional persons viewing tape (if any)			
<b>Names</b>			
<b>Outcome of viewing</b>			
<b>Disc of interest to requestee</b>	Copy disc requested		
<b>DISC RELEASE REQUEST</b>			
<p><i>I acknowledge receipt of the Disc as detailed above. I understand that I am responsible for the safekeeping of this tape and agree that the Disc or images thereon will not be used for any reason other than that specified above. I undertake to return the disc when it is no longer required for the reason stated .</i></p>			
<b>Signature of Requestee</b>	xx	<b>Date</b>	
<b>Signature of CCTV Operator</b>		<b>Date</b>	