# Cambridge City RCCTV Deployment Application Form

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| --- |
| 1. Applicant’s name:
 |
| 1. Job Title:
 |
| 1. Organisation [name, address and postcode]:
 |
| 1. Telephone number:
 |
| 1. Email:
 |
| 1. **I request the deployment of RCCTV equipment from [insert date] to [insert date][[1]](#footnote-1), for the surveillance of [insert location and/or area to be covered, in as much detail as possible[[2]](#footnote-2)]**
 |
| 1. Please attach evidence of the need for deployment[[3]](#footnote-3)
 |
| Signed[[4]](#footnote-4): |
| Date: |
| Email completed form to: asbsection@cambridge.gov.uk  |

Once completed, send to:

Community Safety Team

Cambridge City Council

PO Box 700

Cambridge CB1 0JH

Email: asbsection@cambridge.gov.uk

# For Community Safety Team use ONLY

Ref No:

|  |
| --- |
| Deployment accepted? Yes [ ]  No [ ] Reason (if No):  |
| Signed:  |
| Name:  |
| Date:  |

**Review of Deployment**

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| --- |
| Date of review:  |
| Reason for review:  |
| Results of review:  |
| Signed:  |
| Name:  |
| Date:  |

**Removal of Equipment**

|  |
| --- |
| Reason for removal of equipment:  |
| Signed:  |
| Date:  |

**Privacy Notice**

All personal information that you provide to us is managed in accordance with our Privacy Policy. Please visit the [Privacy Notice](https://www.cambridge.gov.uk/privacy-notice) where you can find information about how we handle your personal information and your rights of access.

1. This period is NOT to exceed 3 months, unless there is clear justification. [↑](#footnote-ref-1)
2. If this request relates to a named individual(s), vehicle or specific address, a RIPA application MUST be completed and attached. [↑](#footnote-ref-2)
3. Include police incidents, crime reference numbers, witness statements, etc. [↑](#footnote-ref-3)
4. Digital signatures are acceptable. [↑](#footnote-ref-4)