# 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](mailto: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](mailto: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**

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| 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)