Unique reference number:

**Application for authorisation to conduct surveillance not regulated by RIPA**

| Public authority(including full address) | North East Lincolnshire Council |
| --- | --- |
| Name of applicant |  |
| Unit / branch / division |  |
| Full address |  |
| Contact details |  |
| Investigation / operation name (if applicable) |  |
| Investigating officer (if a person other than the applicant) |  |

## Details of application

Give rank or position of authorising officer:

Describe the purpose of the specific operation or investigation:

Describe in detail the surveillance operation to be authorised and expected duration, including any premises, vehicles or equipment (e.g. camera, binoculars, recorder) that may be used:

The identities, where known, of those to be subject of the directed surveillance

Name:

Address:

DOB:

Other appropriate information:

Explain the information that it is desired to obtain as a result of the directed surveillance:

Has any warning/notice been served on the target? If not, explain why this surveillance needs to be covert:

Explain why this directed surveillance is necessary:

Supply details of any potential collateral intrusion and why the intrusion is unavoidable.

Describe precautions you will take to minimise collateral intrusion:

Explain why this surveillance is proportionate to what it seeks to achieve. How intrusive might it be on the subject of surveillance or on others? And why is this intrusion outweighed by the need for surveillance in operational terms or can the evidence be obtained by any other means:

### Confidential information

Indicate the likelihood of acquiring any confidential information:

## Applicant’s details

| Name |  |
| --- | --- |
| Grade / rank |  |
| Contact number |  |

Signature:

Date: 28/02/2020

Authorising Officer's Statement:

Why is the surveillance necessary, whom is the surveillance directed against. Where and when will it take place. What surveillance activity/equipment is sanctioned. How is it to be achieved. Spell out the “5 Ws” – Who, what, when, why and how.

I hereby authorise surveillance defined as follows:

Explain why you believe the surveillance is necessary. Why you believe the surveillance to be proportionate to what is sought to be achieved by carrying it out:

Confidential information authorisation:

Date of first review: 28/02/2020

| Name |  |
| --- | --- |
| Grade / rank |  |
| Contact number |  |

Signature:

Date: 28/02/2020

Expiry date and time:

Example authorisation granted on 1 April 2005 - expires on 30 June 2005 at 11:50pm.