**CCTV Request Form**

I am requesting confirmation of CCTV Footage for an incident at:

Solent University – East Park Terrace Campus

Solent University – Test Park Sports Ground

Solent University – Timsbury Boating Lake

Warsash Maritime Academy, Newtown Rd, Warsash

**SECTION 1: Requestor Details**

Title

First Name

Surname

Address 1

Address 2

Town

Post Code

Email Address

Telephone Number

**SECTION 3: REQUEST DETAILS**

Please include the date of incident:

Please indicate a time frame from which your request refers to:

Time of Incident (Information should be provided using the 24 hour clock HH:MM)

Please indicate the location of incident:

**Details of the Incident**

NOTE: Please attempt to be as specific as possible. For example a bicycle theft could include the following:

* Cycle Description: Make, Model, Colour
* Exact location
* Time window of theft
* Type of lock used
* Any extras, lights, basket etc

I have read and understood the terms of this Declaration and **consent** for my personal details to be submitted to the Estates & Facilities Security Team

Signed Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please email this request to the address below and a member of our team will contact you.  
  
Estates & Facilities Security Team   
Solent University

Southampton

SO14 0YN

Email**: estates.admin@solent.ac.uk**