

Hastings Borough Council
Strictly Private and Confidential

Cancellation of Directed Surveillance Authorisation Non-RIPA

| | |
|---|--|
| Public Authority (including full address) | |
|---|--|

| Name of Applicant | Unit/Branch/Division |
|---|----------------------|
| Full Address | |
| Contact Details | |
| Investigation/Operation Name (if applicable) | |

Details of cancellation:

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|--|
| 1. Explain the reason(s) for the cancellation of the authorisation: |
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2. Explain the value of surveillance in the operation:

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3. Authorising Officer's Statement.

I, hereby authorise the cancellation of the directed surveillance investigation/operation as detailed above.

| | | | |
|---------------------|--|-------------------|--|
| Name (Print) | | Grade/Rank | |
| Signature | | Date | |

4. Time and Date of when the authorising officer instructed the surveillance to cease.

| | | | |
|--------------|--|--------------|--|
| Date: | | Time: | |
|--------------|--|--------------|--|

5. Authorisation cancelled**Date:****Time:****6. I understand that the Non-RIPA Authorisation has been cancelled with effect from:****Date:**

| | | | |
|------------------------------|--|--------------|--|
| Name (Print) | | Date: | |
| Signature | | | |
| Investigating Officer | | | |

NB A copy of this form, once it has been authorised must be kept on the Investigation Officer's file. The original must be sent to the Chief Legal Officer, for placing on Hastings Borough Council's Central Register.