Appendix	3b
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Directed Surveillance Unique Reference Number (URN) (to be supplied by the central monitoring officer

Hastings Borough Council

Strictly Private and Confidential

Part II of The Regulation of Investigatory Powers Act (RIPA) 2000 Review of a Directed Surveillance Authorisation

INCAL	ew of a birected 3di veniance Authorisation
Public Authority	
(including full address)	
Applicant	Unit/Branch/
	Division
Full Address	
Contact Details	
Operation Name	Operation Number*
	*Filing Ref
Date of authorisation or last renewal	Expiry date of authorisation or last renewal
	Review Number
Details of review:	
1. Review number a	and dates of any previous reviews.
Review Number	Date

Appendix 3b

Directed Surveillance Unique Reference Number (URN) (to be supplied by the central monitoring officer

2. Summary of the investigation/operation to date, including what private information has been obtained and the value of the information so far obtained.
3. Detail the reasons why it is necessary to continue with the directed surveillance.
4. Explain how the proposed activity is still proportionate to what it seeks to achieve.
5. Detail any incidents of collateral intrusion and the likelihood of any further incidents of collateral intrusions occurring.
6. Give details of any private/confidential information acquired or accessed and the likelihood of acquiring private/confidential information.

Form LA2 December 2012

Appendix 3b

Directed Surveillance Unique Reference Number (URN) (to be supplied by the central monitoring officer

7. Applicant's Details				
Name (Print)	Tel No			
Grade/Rank	Date			
Signature				
·				
8. Review Officer's Comments, including whether or not the directed surveillance should continue.				
0 Authorising Officer's St	otomont			
9. Authorising Officer's St				
	d surveillance investigation/operation as d iew/renewal][it should be cancelled immed			
		·-		
Name (Drint)	Overde / David			
Name (Print)	Grade/Rank			
Signature	Date			
10. Date of next review.				
10. Date of next review.				
	of the review of the RIPA Review Authorisa	ation.		
	of the review of the RIPA Review Authorisa Date	ation.		
11. I understand the extent		ation.		
11. I understand the extent Name (Print)		ation.		

NB A copy of this form, once it has been authorised by the authorising officer and a JP 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.