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| **CCTV Footage (□ Existence □ Viewing) Request**  \*Please read the caution below and fill out the form completely | | | | Processing Time |
| Up to 10 days |
| Applicant | Name |  | Phone |  |
| Date of Birth |  | Relationship to Data Subject |  |
| Address |  | | |
| Data Subject | Name |  | Tel No. |  |
| Date of Birth |  | | |
| Address |  | | |
| Request Details \* | Requested Time Frame |  | | |
| Camera Location |  | | |
| Why you request for footage |  | | |
| *\* Please provide us with accurate information in detail. This will enable us to facilitate the processing of your request.*  I confirm that I am in a position to request this information under the Article 52 of the「 Standard Personal Information Protection Guidelines 」.  Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: DD/MM/YY | | | | |