

# PURVANCHAL ROYAL CITY

## SECURITY CAMERA VIEWING REQUEST FORM

### SECTION 1: Requesting Individual Information

- Full Name:
- Email Address:
- Mobile Number:
- Flat Number: Tower No

### SECTION 2: Recording Details

- Date of Requested Recording: \_\_\_\_\_
- Timeframe of Recording (From – To): (e.g., 2:00 PM to 3:30 PM) \_\_\_\_\_

### SECTION 3: Reason for Request

Please tick the appropriate reason for requesting access to CCTV footage:

- ☐ Criminal Activity  
☐ Missing Property  
☐ Other (please specify): \_\_\_\_\_

Brief Description of Incident or Reason: \_\_\_\_\_

### SECTION 4: Declaration

I, the undersigned, certify that all the information provided in this request is true and accurate to the best of my knowledge. I understand that providing false information or misusing CCTV footage may result in legal action or denial of access.

Signature of Requesting Individual: \_\_\_\_\_ Date: \_\_\_\_\_

### SECTION 5: For Office Use Only

CCTV Operator Review Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Security Officer Verification Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Estate Manager Approval Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_