

Unique Reference Number	
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Part II of the Regulation of Investigatory Powers Act 2000

Renewal of a Directed Surveillance Authorisation

Form RIPADS4

Public Authority <i>(including full address)</i>	Wirral Council, Town Hall, Brighton Street, Wallasey, Wirral. CH44 8ED
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Name of Applicant		Unit/Branch /Division	
Full Address			
Contact Details			
Investigation/Operation Name (if applicable)			
Renewal Number			

Details of renewal:

1. Renewal numbers and dates of any previous renewals.	
Renewal Number	Date

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2. Detail any significant changes to the information as listed in the original authorisation as it applies at the time of the renewal.

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3. Detail the reasons why it is necessary to continue with the directed surveillance.

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4. Detail why the directed surveillance is still proportionate to what it seeks to achieve.

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5. Indicate the content and value to the investigation or operation of the information so far obtained by the directed surveillance.

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6. Give details of the results of the regular reviews of the investigation or operation.

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7. Applicant's Details

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Name (Print)		Tel No	
Grade/Rank		Date	
Signature			

8. Authorising Officer's Comments. <u>This box must be completed.</u>

9. Authorising Officer's Statement.				
<p>I, [insert name], hereby authorise the renewal of the directed surveillance operation as detailed above. The renewal of this authorisation will last for 3 months unless renewed in writing.</p> <p>This authorisation will be reviewed frequently to assess the need for the authorisation to continue.</p>				
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Name (Print)</td> <td style="width: 50%;">Grade / Rank - - - - -</td> </tr> <tr> <td>Signature - - - - -</td> <td>Date - - - - -</td> </tr> </table>	Name (Print)	Grade / Rank - - - - -	Signature - - - - -	Date - - - - -
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Renewal From:	Time:	Date:		

Date of first review.	
Date of subsequent reviews of this authorisation.	