

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

### Review of a Directed Surveillance authorisation

Form RIPADS2

<b>Public Authority</b> <i>(including address)</i>	Wirral Council, Town Hall, Brighton Street, Wallasey, Wirral. CH44 8ED
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<b>Applicant</b>		<b>Unit/Branch /Division</b>	
<b>Full Address</b>			
<b>Contact Details</b>			
<b>Operation Name</b>		<b>Operation Number*</b> <small>*Filing Ref</small>	
<b>Date of authorisation or last renewal</b>		<b>Expiry date of authorisation or last renewal</b>	
		<b>Review Number</b>	

**Details of review:**

<b>1. Review number and dates of any previous reviews.</b>	
<b>Review Number</b>	<b>Date</b>

<b>2. Summary of the investigation/operation to date, including what private information has been obtained and the value of the information so far obtained.</b>
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**3. Detail the reasons why it is necessary to continue with the directed surveillance.**

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**4. Explain how the proposed activity is still proportionate to what it seeks to achieve.**

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**5. Detail any incidents of collateral intrusion and the likelihood of any further incidents of collateral intrusions occurring.**

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**6. Give details of any confidential information acquired or accessed and the likelihood of acquiring confidential information.**

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**7. Applicant's Details**

<b>Name (Print)</b>		<b>Tel No</b>	
<b>Grade/Rank</b>		<b>Date</b>	

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<b>Signature</b>	
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<b>8. Review Officer's Comments, including whether or not the directed surveillance should continue.</b>

<b>9. Authorising Officer's Statement.</b>
I, [insert name], hereby agree that the directed surveillance investigation/operation as detailed above [should/should not] continue [until its next review/renewal][it should be cancelled immediately].
<b>Name (Print)</b> ..... <b>Grade / Rank</b> - - - - -
<b>Signature</b> - - - - - <b>Date</b> - - - - -

<b>10. Date of next review.</b>	
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