

Tenant Alterations Application Form – CCTV/Camera doorbell

Full name of t	enant(s):				
Full address o	f property:				
Where and ho	ow will the camera be attached to the property?				
The specific area that will be captured with the camera?					
The lawful rea	ason why you will be recording this area?				
Will these rec	ordings be saved or stored? (Please tick)	Yes:	No:		
If the previou	s question was answered yes, you will also need to confirm;				
0	How long will you store these.				
0	How you intend to use this information.				
0	Who you intend to share this information with.				
0	How this information will be securely stored.				



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By completin	g and signing the form you	u are confirming:		
That the information I have supplied is correct to the best of my knowledge, I have read and understand the Information Commissioners Office's guidance on how CCTV should be used, and I confirm that at no point will I be in breach of these guidelines.				
Full name:		Signature:	Date:	
Full name:		Signature:	Date:	