



# Camera Request Form

Pursuant to University of Tennessee policy, all video surveillance on the property of the University of Tennessee or on properties rented, leased, or otherwise occupied by the University must be approved by UT Public Safety prior to any installation, modification, or change. Completion of this form is only an application and does not constitute approval for any installation, modification, or change for any video surveillance. You will be notified in writing by a representative of UT Public Safety at such time that any installation, modification or change is either approved or denied. UT Public Safety does not accept any responsibility for video surveillance which is installed, modified, changed, or used in any manner outside the approval or in violation of University policy, or State law.

Requesting Department \_\_\_\_\_ Division \_\_\_\_\_

Person making the request \_\_\_\_\_ Phone: \_\_\_\_\_

Video camera(s) to be used for the following purpose:

""Crime deterrence (Theft, vandalism, trespassing, etc.)

""Monitor restricted areas for unauthorized persons (Dorms, labs, etc.)

""Other, Please explain: \_\_\_\_\_

Do you intend to record video images, have a live monitor, or both? \_\_\_\_\_

How long do you intend to store recorded video images? \_\_\_\_\_

Duration of camera use: ""Indefinite

""Temporary From: \_\_\_\_\_ To: \_\_\_\_\_

Number of video cameras to be installed/modified/changed: \_\_\_\_\_

*\*Please attach a detailed description of the exact location(s) of the requested surveillance camera to be installed, modified or changed—also describe the direction the camera(s) will be pointing (the viewing area).*

\_\_\_\_\_  
Signature of Dean/Department Head

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

## FINAL APPROVAL

\_\_\_\_\_  
Director of Physical Security

\_\_\_\_\_  
Date

\_\_\_\_\_  
Video Coordinator

\_\_\_\_\_  
Date

Note: Approval of this request does not include funding for the camera system and/or associated installation costs.