

# METRO TRANSIT POLICE DEPARTMENT

## Digital Video Evidence Request

**MULTIPLE SITE REQUESTS** (A SEPARATE REQUEST IS REQUIRED FOR EACH ADDITIONAL SITE)

EVENT INFORMATION					
MTPD CFS:		MTPD CCN:		EVENT DATE:	
RAIL STATION or FACILITY		RAIL CAR # / YARD / TRACK #		BUS # / ROUTE / DIVISION	
REQUEST TYPE: (select only one)	<input type="radio"/> ORIGINAL <input type="radio"/> ADD'L COPY <input type="radio"/> AMENDED	EVENT CLASSIFICATION: (select only one)	<input type="radio"/> CRIMINAL <input type="radio"/> NON-CRIMINAL <input type="radio"/> PARP/SUBPOENA/PRESERVATION		
EVENT:				EVENT TIME:	
EVENT LOCATION:					
REQUESTED VIDEO DATE & TIME:					
REQUESTER INFORMATION					
NAME:				PHONE:	
AGENCY:				EMAIL:	
ON BEHALF OF:				PHONE:	
AGENCY:				EMAIL:	
OUTSIDE AGENCY CCN:				DOCKET/ PARP #:	
NARRATIVE FACTS OF CASE					

<b>RECOVERY INFORMATION (MTPD USE ONLY)</b>			
<b>REQUEST RECEIVED:</b> <input type="checkbox"/> Log Initiated		<b>REQUEST COMPLETED:</b> <input type="checkbox"/> Log Completed	
<b>COMPLETED BY:</b>			
<b>TIME EXPENDED:</b>			
<b>VIDEO SYSTEM(s):</b>	<input type="checkbox"/> VERINT <input type="checkbox"/> DM <input type="checkbox"/> APOLLO <input type="checkbox"/> RIA <input type="checkbox"/> TACTICAL MICROS <input type="checkbox"/> OTHER --->		
<b>DVR TIME DISCREPANCY:</b>		<b>PICKUP NOTIFICATION:</b>	
<b>DISPOSITION:</b>			
<b>RECEIVING AGENCY REPRESENTATIVE (MTPD USE ONLY)</b>			
<p>I certify that I am the above noted requester or an authorized agent of the above noted requester and am permitted to take possession of the video(s)/image(s)/document(s).</p> <p>_____ <b>Internal WMATA Department:</b> I acknowledge that the use, review, and storage of the above received video(s)/image(s)/document(s) must comply with WMATA P/I Number 11.6/0.</p> <p>_____ <b>External Law Enforcement Agency:</b> I acknowledge that prior to public release of the above received video(s)/image(s)/document(s), notification to the Metro Transit Police Department is required by emailing MTPD_DVEUNotification@wmata.com Notification must contain: contact information (name, email, and phone number), MTPD Case Number, and a short description of what is being released. <b>Failure to make this notification prior to release of above noted items may affect future requests.</b></p> <p>PRINTED NAME: _____</p> <p>SIGNATURE: _____ DATE: _____</p>			