WAYNE COUNTY AIRPORT AUTHORITY
AIRPORT SECURITY

REQUEST FOR COPY/STORAGE OF CCTV VIDEO OR PHOTO
Form may be faxed to Airport Security at (734) 942-3814 or emailed to security@wcaa.us

Requested by: _____
Print Name *Title* *DTW Badge #*

_____
Company Name *Contact Phone #*

_____
Email Address of Video Recipient

Recording Date: _____ Recording Time From: _____To: _____

Location: _____

Description of information on CCTV system (**BE SPECIFIC**): _____

_____

Reason for Request: (FOIA, incident investigation, etc.): _____

Requested # of copies: _____

TSA archived/storage CCTV Video: ☐ Yes ☐ No TSA Case #: _____

Police report created: ☐ Yes ☐ No Case #: _____ Date: _____

Print name of individuals receiving copies: _____

IMPORTANT: Digital video not archived/saved may be overwritten
I understand that I may be charged a $25.00 fee for this request.

Authorized Signature for Request: _____ Date: _____

Print name Authorized Signer: _____ Badge #:_____

AIRPORT SECURITY USE ONLY

Copied By: _____ # of Copies: _____ Date: _____

Archived By: _____ Archive Location: _____ Date: _____

Approval to Release Video: _____ Date: _____

SVP Approval:_____ Date:_____

Video Released Signature: _____ Date: _____

Print name Video Released: _____ Badge #:_____

Revised: 1/26