



## Request for Security Report or Review of Video

Please complete this form to make a request for a security report or review of video. If you do not enter accurate or required information, we may be unable to fulfill your request. Digital images to include photographs, video, or audio files may not be released without a court order or subpoena but may be viewed upon approval at The Landings Association's office.

Only persons directly involved, parents or legal guardians of minors, or duly-appointed next-of-kin for deceased persons in the material requested may receive the information, and The Landings Association reserves the right to deny any and all requests.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Select a suitable description of yourself and the purpose of the request:

- An individual seeking information for direct personal use and not for commercial use. If the subject matter of your request is yourself, TLA staff may contact you to verify your identity.
- Affiliated with a law firm or law enforcement agency and lawfully seeking information regarding a civil or criminal case and in accordance with Georgia's discovery laws.

Describe the type(s) of information you are requesting. Please provide as much relevant information as possible (i.e. date of incident, location, involved parties, printed report, review of video, etc.)

---



---



---



---



---

----- Office Use Only -----

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_

Request     Pending             Approved             Denied

Comments:

---



---

Security Director: \_\_\_\_\_ General Manager: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

Date Request Fulfilled (if applicable): \_\_\_\_\_ Fulfilled By: \_\_\_\_\_