



Division 03

Communication and Information Management/Technology

Chapter 01 – Audio Recording Request From Public Safety Communications

January 2009

POLICY

Internal and external requests for audio recordings will follow the established procedure. In order to properly process and consider requests for audio recordings, it has become necessary to standardize the method for production of these tapes. This process will encompass requests for audio tapes from internal and external sources.

These recordings are not authorized for personal use; however, they may be used in conducting a critique of an emergency incident, to satisfy a complaint or potential disciplinary issues or other matters relating to the day-to-day operations of the Prince George's County Fire/Emergency Medical Services (EMS) Department.

Communications Operations Officer. No requests will be considered if the request is not in writing using the attached form.

Requests from persons outside the Fire/EMS Department must be made in writing to the Office of Homeland Security Public Safety Communications.

REFERENCES

N/A

FORMS/ATTACHMENTS

Audio Recording Request Form

DEFINITIONS

N/A

PROCEDURES

1. General Guidelines

The "Audio Recording Request" form (see attachment) must be completed by a command level officer and have a specific purpose stated in order for the request to be considered.

All requests must be made to the Emergency Operations Command within 14 days of the incident and picked up during normal business hours unless other arrangements have been made with the Public Safety



INTER-OFFICE MEMORANDUM
PRINCE GEORGE'S COUNTY, MARYLAND

AUDIO RECORDING REQUEST FORM

Date of Request: ___/___/___

REQUIRED INFORMATION

Incident Number: _____ Type of Incident: _____
Date of Incident: _____ Time of Incident: _____
Location of Incident: _____
Time Range to be Copied: _____
911 Conversation: _____ Radio Traffic: _____ Indicate Channels: _____
Other: _____

INTENDED USE

REQUEST BY: _____
Name Rank Phone

APPROVAL

EOC: ___/___/___ INITIALS: _____
MSC: ___/___/___ INITIALS: _____

PSC USE ONLY

Date Recording Made: ___/___/___
Date Requesting Officer Notified: ___/___/___ Notified By: _____
Tape Received/Reviewed By: _____ Date: ___/___/___

NOTICE: TAPE MUST BE PICKED UP WITHIN 14 DAYS OF NOTIFICATION BY PUBLIC SAFETY COMMUNICATIONS