Status: This is the original version (as it was originally adopted).

Directive 2014/41/EU of the European Parliament and of the Council of 3 April 2014 regarding the European Investigation Order in criminal matters

Status: This is the original version (as it was originally adopted).

## ANNEX C

## **NOTIFICATION**

This form is used in order to notify a Member State about the interception of telecommunication that will be, is or has been carried out on its territory without its technical assistance. I hereby inform ... (notified Member State) of the interception.

(A) (¹) THE COMPETENT AUTHORITY Official name of the competent authority of intercepting Member State:			
Name of its representative:			
Post held (title/grade):			
Address:			
Tel. No: (country code) (area/city code)			
Fax No: (country code) (area/city code)			
E-mail:			
File reference:			
Date of issuing:			
Languages in which it is possible to communicate with the authority:			
(B) INFORMATION CONCERNING THE INTERCEPTION			
(I) Information about state of play: This notification takes place (please tick)			
prior to the interception			
during the interception			
after the interception			
(II) The (anticipated) duration of the interception (as known to the issuing authority):			
, starting from			
(III) Target of the interception: (telephone number, IP number or e-mail)			
(IV) Identity of the persons concerned			
State all information, as far as they are known, regarding the identity of the (i) natural or (ii) legal person(s)			
against whom the proceedings are/may be/is taking place:			
(i) In the case of natural person(s)			
Name:			
First name(s):			
Other relevant name(s), if applicable:			
Aliases, if applicable:			
Sex:			
Nationality:			
Identity number or social security number:			

<sup>(1)</sup> The authority which is referred to here is the one which should be contacted in further correspondence with the issuing State.

Status: This is the original version (as it was originally adopted).

		Date of birth:	
		Place of birth:	
		Residence and/or known address; if address not known, state the last known address:	
		Language(s) which the person understands:	
	(ii)	In the case of legal person(s)	
		Name:	
		Form of legal person:	
		Shortened name, commonly used name or trading name, if applicable:	
		Registered seat	
		Registration number:	
		Address of the legal person:	
		Name and contact details of the representative of the legal person:	
(V)	Informat	tion regarding the purpose of this interception:	
State all information necessary, including a description of the case, legal classification of the offence(s) and the applicable statutory provision/code, in order to enable the notified authority to assess the following:			
		whether the interception would be authorised in a similar domestic case; and whether the material obtained can be used in legal proceedings	
		where the interception has already occurred, whether that material can be used in legal proceedings	
	•••••		
Please note that any objection to the interception or the use of already intercepted material must be made no later than 96 hours after the reception of this notification.			
(C) SIGNATURE AND DATE			
Signatu	ure:		
Date:			
Official stamp (if available):			