CM Ref: DOC/20/219405 [BAV]

Suggestion for MMAO deployment

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| --- | --- |
| **Name:** |  |

|  |  |
| --- | --- |
| **Date:** |  |

|  |  |  |
| --- | --- | --- |
| **Company:** |  |  |

|  |  |
| --- | --- |
| **Route number/location for deployment: \*** |  |
|  | |

**Recommended time/s of day:**

☐ Morning ☐ Afternoon ☐ Evening ☐ Any

**Recommended day/s of the week:**

☐ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri ☐ Sat ☐ Sun ☐ Any

**Any other information that could assist:** (e.g. stop numbers, exact time of day, direction of travel, type of fare evasion or behaviour observed previously, etc.)

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**If a deployment is undertaken, would you like feedback?**

☐ Yes please ☐ No thanks

|  |  |
| --- | --- |
| **Email address for feedback:** |  |

**\*NOTE**, Please send single or multiple recommendations/locations for deployment by email to [sabina.x.nadeem@dot.vic.gov.au](mailto:sabina.x.nadeem@dot.vic.gov.au). Please provide the details listed above for each request to ensure deployments can be as effective as possible