

DATE: [Insert Date]

TO: [Name of IT Director/System Administrator/Custodian]

FROM: [Name of Investigator/Legal Counsel]

SUBJECT: FORMAL NOTICE: Forensic Image Preservation of Computing Assets

1. PURPOSE

This letter serves as a formal instruction to perform a forensic image preservation of specific computing assets related to internal investigation [Investigation Case Number/Name]. This action is required to ensure the integrity of digital evidence and to prevent the spoliation of data.

2. IDENTIFIED ASSETS

Please secure and create bit-by-bit forensic images of the following hardware:

- **User Name:** [Name of Employee/User]
- **Device Type:** [e.g., Laptop, Desktop, External Drive]
- **Make/Model:** [e.g., Dell Latitude 5420]
- **Serial Number/Asset Tag:** [Insert Number]
- **Location:** [Current Physical Location of Device]

3. PRESERVATION PROTOCOLS

In performing this preservation, the following protocols must be observed:

- **Immediate Isolation:** The device should be powered down (if currently off) or disconnected from all networks (if currently on) to prevent remote wiping or synchronization.
- **Forensic Imaging:** Use industry-standard write-blocking hardware and forensic software (e.g., EnCase, FTK Imager) to create a full physical image (E01 or RAW format).
- **Verification:** Generate MD5 or SHA-1 hash values for the source drive and the resulting image to verify data integrity.
- **Chain of Custody:** Document every individual who handles the device and the storage media containing the forensic image.

4. STORAGE AND SECURITY

The original device and the resulting forensic image must be stored in a physically secure, climate-controlled environment with restricted access. Do not return the original device to service or allow the user access to the hardware until formal authorization is provided by [Department Name].

5. CONFIDENTIALITY

This preservation request is strictly confidential. Do not disclose the existence of this request or the ongoing investigation to the device user or unauthorized personnel.

6. ACKNOWLEDGMENT

Please acknowledge receipt of this letter and confirm when the forensic imaging process has been completed by signing below or replying via secure email.

Recipient Signature / Date

Authorized Investigator Signature / Date