

Glendale Police Department



Community Camera Registration Program

Residential or Business?

_____ Residential _____ Business

Number of Cameras: _____

Address:

Street Number: _____ Street Name: _____

City: _____ State: _____ Zip Code: _____

Primary Contact Person: _____

Telephone Number: _____

Email Address: _____

Secondary Contact Person: _____

Telephone Number: _____

Email Address: _____

Terms of Use:

If you choose to participate in this program and, if a crime(s) occurs in your area and investigators believe your video surveillance system may be helpful for investigation purposes, the Glendale Police Department may contact you directly, using the information provided by you at the time of this registration, to request the appropriate video surveillance footage. Any and all surveillance footage shall remain the property of the registrant until it is requested by and collected from the registrant by the Glendale Police Department. Your voluntary participation in this program shall not be construed as an obligation to release any surveillance video footage to the Glendale Police Department. Any footage containing or related to criminal activity collected by the Glendale Police Department may be used as evidence during any stage of a criminal investigation and criminal proceeding. Under no circumstances shall registrants construe that they are acting as an agent and/or employee of the City of Glendale or the Glendale Police Department through this program. Under no circumstances shall the Glendale Police Department utilize any information obtained to view footage or feeds directly from cameras owned by the registrants. The information you provide regarding your video surveillance system will be for official use only, but may be subject to Open Records requests as required by law.

By signing below, you are indicating that you understand the terms and conditions listed above.

Signature: _____ Date: _____