ORD POLICE DEPARTMENT COMMUNITY CAMERA PROGRAM SIGN-UP FORM

Name:				
First				
Last				
Business Na	me (If a business)			
Address				
Phone Numb	per			
Recording A	rea			
•	Only when motion is detected			
•	Only during business hours			
•	^C 24 hours			
Estimated Retention				
How long before recordings are overwritten?				
Number Of Cameras				
Camera Coverage				
•	□ Front Yard			
•	□ Back Yard			
•	□ Side Yard			
•	□ Parking Lot			
•	□ Street			
•	☐ Cash Register (Business)			
•	☐ Interior (Business)			

Additional Information

Terms and Conditions *

• I agree to the terms and conditions

Terms and Conditions The information you provide regarding your camera systems will be for official use only. Your personal information will remain confidential and not be distributed except as required by law or court order. This program is entirely voluntary and you can withdraw consent to view video footage from you camera system at any time by calling the Ord Police Department. If necessary, the Ord Police Department will contact you directly, using the information provided by you at the time of registration, to request the appropriate video surveillance footage. Any video footage containing or related to criminal activity collected by the Ord Police Department may be used as evidence during any stage of a criminal proceeding. Under no circumstances shall the registrants construe that they are acting as an officer and/or employee of the City of Ord and/or the Ord Police Department through the program. I understand and agree to the Disclaimer and Terms of Use.

Signature		
Signature		

Return to:

Ord Police Department 205 S 17th Street Ord, NE 68862