



Private Video Surveillance Camera Registration Form

The South Plainfield Police would like to thank you for voluntarily providing your private security camera detail. Our goal is to make South Plainfield an undesirable place for criminals to commit their crimes. This form can be submitted by emailing Det Sgt Garrett Cassio or printed out and dropped off at the South Plainfield Police Department, or mailed to 2480 Plainfield Ave, South Plainfield, NJ 07080, Att: Sgt Cassio. If your prefer contact by phone, or in person, contact Sgt Cassio at (908)226-7762.

ESTABLISHMENT DETAILS

Is your system located at a i	esidence or commer	cial/business e	establishment? (circle o	ne)
RES	RESIDENTIAL		COMMERCIAL/BUSINESS	
Business Name:				_
Full Street Address:	A Control of the Cont	- 70000 A		_
Recording Period: (circle on	e) MOTION	24/7	BUSINESS HOURS	
Are your images saved and	stored on a DVR or re	cording devic	e: (circle one) YES	NO
How long is your data store	d (i.e. 24 hours, one v	veek, 30 days)		
Describe areas recorded (i.e	e. street view, front ya	ard, parking lo	t, etc.):	***************************************
CONTACT INFORMAT	ION			
Primary Contact for Camera	1:			_
EMAIL:	***************************************	Phone:		
Is the camera monitored by	a security company:	(circle one)	YES	NO
COMMENTS:				

After registering your camera, you would only be contacted by the South Plainfield Police if there is a criminal incident in the vicinity of your security camera.