

SOUTH PLAINFIELD POLICE DEPARTMENT

2480 PLAINFIELD AVENUE SOUTH PLAINFIELD, NJ 07080 908-755-0700



VIDEO SURVEILLANCE CAMERA REGISTRATION FORM

The South Plainfield Police Department would like to thank you for voluntarily providing your video surveillance camera details. Our goal is to make South Plainfield an undesirable place for criminals to commit crimes by promptly catching and successfully prosecuting them. The completed form may be emailed/returned to Det. Sgt. Stephen Perhach at sperhach@sppolice.com, Det. Chris Blath at cblath@sppolice.com, or at the police window in borough hall.

SURVEILLANCE CAMERA DETAILS

is your surveillance camera located a res	sidence or commercial/	business establishment	(circle one)
RESIDE	NTIAL	BUSINESS	
Business/Resident's Name:			
Full Street Address:			
Recording Period: MOTION			
Is the video stored on a DVR device or	online/cloud? DVR	ONLINE	NONE
How long is data stored? (i.e. 24 hours,	one week, 30 days):		
What are areas recorded (i.e. street view	, front doors, parking l	ot, etc:)	
Is the camera monitored by a security co	ompany?		
CONTACT INFORMATION:			
Primary Contact for Camera:			
Email:	Phone	e:	
Additional Contact for Camera:			
Email:	Phone	۵۰	

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