

Franklin Camera Registry Program

The Franklin Police Department is asking for your help in combating crime. Many residents and businesses have video surveillance systems. While your system records activity happening on your own property, it may also capture movement and actions occurring in areas surrounding your property. Footage of this nature could be a valuable tool in an effort to solve crime. Residents and business owners can be a part of the Franklin Camera Registry Program by registering their video surveillance system with the Franklin Police Department. The information entered into this program will enable police officers to work with residents and businesses to collect potential video evidence. **It is important to note we will NOT have direct access to your surveillance system, but would simply request your help with any potential video evidence.**

If you wish to register your video surveillance system in the Franklin Camera Registry Program, please read the below *Terms of Use/Disclaimer* prior to completing and submitting the attached fillable form. The completed form can be mailed or dropped off at the Franklin Police Department located at 9455 W. Loomis Road, or emailed to jczewinski@franklinwi.gov. **Please Note: This information will be confidential and available to Franklin Police Department personnel only.**

TERMS OF USE/DISCLAIMER

*The registration of your video surveillance system is completely voluntary. Registration into the program will be kept confidential by the Franklin Police Department unless subject to disclosure by court order. **Registration DOES NOT provide the Franklin Police Department with direct access to your video surveillance system.** It will allow police officers to contact the owner of the video surveillance system to view and/or download potential surveillance footage. Surveillance system owners will only be contacted by the Franklin Police Department in the event that there is an incident in the vicinity of their video surveillance system. In such event, police personnel may request a copy of any footage captured by the individual's video surveillance system that may assist in the investigation of a crime.*



FRANKLIN POLICE DEPARTMENT

CAMERA REGISTRY PROGRAM

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CAMERA OWNER'S NAME

First Last

ADDRESS OF CAMERA LOCATION

Street Address Address Line 2

City State Zip

Owners Email Address Owners Phone Number

VIDEO SYSTEM COMPONENTS

Interior Views Exterior Views

DESCRIBE EXTERIOR VIEWS

Front Yard Back Yard Left Side Right Side Street Views Driveway

TYPE OF RECORDING SYSTEM

High Definition Standard Definition Low Light Motion Activated Infrared Other *

Describe Other

NEARBY INTERSECTIONS OR LANDMARKS RECORDED

RETENTIONS METHOD (i.e. Cloud, DVR) AND TIME RETAINED

I have read and agree with the Franklin Police Department's Terms of Use found at www.police.franklinwi.gov. Yes

Return completed forms to jczerwinski@franklinwi.gov.