## FLAGLER BEACH POLICE DEPARTMENT



Matthew Doughney, Chief of Police 204 S. Flagler Ave Flagler Beach, Fl 32136 386.517.2023

## Community Eye Watch Program

The Flagler Beach Police Department is requesting your assistance in creating a database of residences and businesses within the city that have video camera systems. With your assistance and video footage from your residence or business, we will have a better chance of solving crimes that occur in your neighborhood. If you would like to participate in this exciting new program, please complete the form below and drop it off at our office at 204 S. Flagler Ave Flagler Beach FL 32136 or mail it to us at P.O. Box 36 Flagler Beach FL 32136. Thank you for assistance!

## PLEASE PRINT THE FOLLOWING INFORMATION

Name:			
Addres	s:		
Teleph	one #: Main color of your home:		
Neares	st major intersection of your home:		
<u>Please</u>	e circle your answers below.		
1.	Are the cameras at this address for a business or a residence?		
	Business		
	Residence		
2.	Does your system record?		
	Yes		
	No		
3.	3. Do you know how to operate your system to include downloading the video or pictures?		
	Yes		
	No		
4.	Is your system web based or maintained on a hard drive (DVR)?		
	Web Based		
	Hard Drive		
5.	Are your cameras operational?		
	Yes		
	No		
6.	Do the cameras capture any portion of the roadway?		
	Yes		
	No		



OFFICE USE ONLY

Entered by:

## Community Eye Watch Program

7.	Where are your cameras located?	
	Inside	
	Outside	
	Both	
<u>Came</u>	ra Registration Program - Disclaimer	
herein Flagle reason unders assum releas agents this ca Depar Sectio official Public The F effecti seriou	omitting this form, you hereby certify that you have read and understood after described. In the interest of deterring crime and promoting public or Beach Police Department may contact you directly to request surveing to believe that your security system has captured evidence of crimination and agree that you are solely responsible for your security cambre all risks and liability regarding the use and operation of such system, and discharge the Flagler Beach Police Department and its employers from any and all liability arising from the use of your security system amera registration program. Any footage turned over by you to the tement is done so voluntarily and will be protected from public disclosure in section 19.071, Florida Statutes (2017), except where disclosure and 19.071, Florida Statutes (2017), except where disclosure in the program of the program of the program in this program and the program in reducing or resolving crime or protecting as injury. Under no circumstances shall this form be interpreted as and to act as an agent and/or employee of the Flagler Beach Police Department o	safety, you agree that the illance footage if there is hinal activity. You further era system and that you tem. You hereby waive, ees, representatives, and and your participation in he Flagler Beach Police to the extent required by sure is necessary for an of the State Attorney and am upon written request, or guarantees as to the ny person from death or an authorization for any
Signatu	re of property owner:	Date:

Date: