

City of Clarksburg
Clarksburg Police Department



Doorbell Camera Registration Program

Location Details

Name: _____

Complete Address: _____

Primary Telephone #: _____ Secondary Telephone #: _____

Email Address: _____

Recording Type (Check One) **Motion** **Continuous**

Please select doorbell camera location/coverage area(s):

Exterior to the front

Exterior to the left (facing front door)

Exterior to the rear

Exterior to the right (facing front door)

Sidewalk

Street/Roadway

Additional Information:

I have read and agree with the terms of use: **YES** **NO**

The City of Clarksburg/Clarksburg Police Department thanks you for voluntarily providing your camera details. Please return both forms by email to mkiddy@cityofclarksburgwv.com, FAX (304-624-1616), or in person at the police department front desk.

Doorbell Camera Registration Program



Program Policy

- Registering your system does not provide the City of Clarksburg/Clarksburg Police Department with direct access to your doorbell camera system.
- Individual's personal information will be kept confidential by the City of Clarksburg/Clarksburg Police Department unless subject to disclosure by court order.
- If necessary, information/surveillance footage will be accessed by law enforcement personnel who in performance of their official duties are investigating a crime in the vicinity of the camera location.
- Registrants will only be contacted by the Clarksburg Police Department if there is a criminal incident in the vicinity of the doorbell camera.

Terms of Use

The goal of this program is to deter crime and promote public safety through the effective collaboration of the City of Clarksburg/Clarksburg Police Department and the community. Accordingly, by registering my doorbell camera system, I am indicating my agreement to the following terms:

- My information will be kept confidential by the City of Clarksburg/Clarksburg Police Department unless subject to disclosure by law or court order.
- Under no circumstances are registrants acting as an agent or employee of the City of Clarksburg or Clarksburg Police Department through their participation in this program.
- This program does not and cannot provide active surveillance of my property and is not construed as a promise or obligation to provide any level of safety or security to my property.
- If necessary, the Clarksburg Police Department will contact me directly, using the information I provided in this form, to request to view and obtain a copy of the appropriate video surveillance footage.

Signature: _____

Date: _____

