



Scotts Valley Surveillance System Registration

Thank you for registering your surveillance camera system with the Scotts Valley Police Department. Please complete the following information (a red asterisk denotes a required field). The completed form may be returned to SVPD in person, by fax at 831.438.6930, or by email to svpd-records@scottsvalley.gov

First and last name of the owner of the camera system: *

Street address: *

Home phone number:

Cell phone number:

Other phone number:

Email address:

How long does your surveillance system store a recording? *

How can the video from your system be copied? *

If "Other," please explain:

How many outdoor cameras are located at your property?

Do you currently have a camera facing the front area of your property?

Yes

No

Do you currently have a camera facing your side yard?

Yes

No

Do you currently have a camera facing the back of your property?

Yes

No

Do you currently have a camera that views the street and vehicles?

Yes

No

How are your videos stored?

If "Other," explain:

Camera resolution:

Below 720ppi (pixels per inch)

720ppi

1080ppi

Other

Explain if "Other:"

Do your cameras capture viewable images at night (infrared, etc.)?

Yes

No

Can you access your system and view video remotely?

Yes

No

If this is a business, please provide emergency contact information. First and last name:

Phone number of emergency contact:

Please provide any additional information about your system: