



**Lodi Police Department**  
One Memorial Drive  
Lodi, New Jersey 07644-1693  
Tel: 973-473-7600 Fax: 973-473-8410



Vincent A. Quatrone  
Chief of Police

Donald Scorzetti  
Deputy Chief of Police

## **The Lodi Police Department is launching a new cooperative program in crime fighting!**

### **THE LODI POLICE DEPARTMENT COMMUNITY CAMERA PARTNERSHIP PROGRAM**

The Lodi Police Department invites residents and business owners to help us deter and solve crimes by registering your residential and/or business security cameras with us. Are you one of the many residents or businesses that have security cameras?

If so, you may be able to help us solve a case or even deter crimes before they happen.

By registering your cameras with us, we could then contact you in the event an incident occurred near your home or business that is within the camera coverage range. Then, with your permission, you could be contacted and asked to provide us with a copy of the video footage.

This footage would not be released to the press or the public, and your information would be kept confidential and protected by law. If you would like to participate in this free program, please download the form today and complete the required sections.

You may return it to us via regular mail at  
Lodi Police Department, Attention: CAPP, 1 Memorial Drive, Lodi, New Jersey 07644  
or via electronic mail at  
[info@lodipd.org](mailto:info@lodipd.org).





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Dear Resident/Business Owner:

Are you one of the thousands of people who use private video surveillance at your home or business? If you do, the Lodi Police Department would like to hear from you. Video surveillance is one of the best methods for apprehending criminals and convicting suspects who are caught in the act of committing a crime.

The Lodi Police Department is asking residents and business owners to register their privately-owned surveillance camera systems. As officers respond to criminal incidents, they may be able to use the footage gathered from the security cameras to help apprehend and prosecute the people involved.

You would only be contacted if there is a criminal incident in the vicinity of your camera. Police personnel may ask to view your camera footage to assist with an investigation. Information provided to the Lodi Police Department regarding your camera system will be used in an **official capacity only**. Your personal information will remain confidential, except as required by law. If needed, you would agree to provide a copy of the video file for further investigation and evidence.

Our goal is to empower the residents by taking a community wide approach to policing. We hope that you will join use in this initiative and help protect the community we care about. If you are interested, please fill out and return the form included with this letter. Thank you in advance for your anticipated cooperation in this matter.



**Lodi Police Department**  
**Attention: Community Camera Partnership**  
**One Memorial Drive**  
**Lodi, New Jersey 07644-1693**  
**Tel: 973-473-7600 Fax: 973-473-8410**



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## Community Camera Partnership Program Submission Form

**DISCLAIMER AND TERMS OF USE:**

*The goal of the Community Camera Partnership Program is to deter crime and promote public safety through collaboration between the Lodi Police Department and the community we serve. Accordingly, all Community Camera Partnership registrants agree to the following terms and conditions:*

- Any footage containing or related to criminal activity may be collected by the Lodi Police Department for use as evidence during any stage of a criminal proceeding.
- Relevant information is reserved for official use by the Lodi Police Department and will not be released to any member of the general public or press.
- If necessary, the Lodi Police Department will contact you directly, using the information provided on this application, to request the appropriate video surveillance footage.
- Under no circumstances shall registrants construe that they are acting as an agent and/or employee of the Lodi Police Department through the Community Camera Partnership Program.
- Under no circumstances shall the Lodi Police Department utilize any information obtained to view footage/feeds directly from cameras owned by registrants.
- By checking the designated box indicated acceptance of the above terms and conditions.

I agree to the terms and conditions.

**Required Information**

Address of Cameral Location: \_\_\_\_\_

Description (how many cameras /coverage area, i.e., side, front, etc.): \_\_\_\_\_

Resident/Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact E-mail Address: \_\_\_\_\_

Additional Information: \_\_\_\_\_

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