



Spring Lake Heights Police Department Operation Watchdog Registration Form



Name *(required)* :

E-Mail *(required)* :

Company Name *(if applicable)* :

Full Address *(required)* :

Primary Phone Number *(required)* :

Business Phone Number *(if applicable)* :

Make Of Security System *(required)* :

How Many Operational Cameras? *(required)* :

How Long Is Video Saved To The System?

Does The System Record Audio?

Does The System Record The Street?

Are You Proficient With The System Such As:

Retrieval Search Retrieval And Copying Of Video

Print, Complete and Return This Form To:

Spring Lake Heights Police Department
ATTN: Sergeant Zachary Ramp
555 Brighton Avenue
Spring Lake Heights, NJ 07762

or

E-Mail To: zramp@springlakehts.com