



Hermosa Beach Police Department

540 Pier Ave.
Hermosa Beach, CA 90254

SECURITY CAMERA REGISTRATION FORM

"We exist so Hermosa Beach can be the safest little beach city through partnerships, integrity and excellent service."

Registered Owner

Name: _____

*Address of Camera System: _____

City: **Hermosa Beach** Zip: **90254**

Location is: (check one) Business or Residence

Company/Business Name (if applicable): _____

Contact Phone: () _____ Email: _____

* One location per form. To register multiple locations, please use separate forms. -No P.O. Boxes accepted

System Information

Describe the areas the cameras cover: (i.e. front porch, facing street, sidewalk, etc.)

Camera 1: _____

Camera 2: _____

Camera 3: _____

Camera 4: _____

Camera 5: _____

Are images stored on a DVR or recording device? Yes How Long? _____ or No

Note: Registrant is aware and consents to the Hermosa Beach Police Department's release of submitted video imagery to the public/media or to requestors as allowed under the California Public Records Act

To Return Form via Email or Mail:

Email: pdps@hermosabeach.gov or

Mail: Hermosa Beach Police Department, 540 Pier Ave. Hermosa Beach CA 90254