



Kingston Municipal Police Department

500 Wyoming Avenue
Kingston, Pennsylvania 18704
Telephone: 570-288-3674 FAX: 570-287-2699



C A P T U R E:

Community Awareness Program Through Utilizing Residential (Electronic) Eyes.

The Kingston Municipal Police Department is launching a CAPTURE program.

Video surveillance is one of the best methods for apprehending criminals and convicting suspects who are caught in the act of committing a crime. Video surveillance is a great crime deterrent and offers investigative leads in the event a crime does occur. The Kingston Municipal Police Department strongly encourages installing residential and business surveillance systems.

By registering with the Kingston Municipal Police Department, we can quickly identify nearby cameras that may have CAPTUREd criminal activity. If a crime occurs in your neighborhood, you may be contacted by a member of the Kingston Municipal Police Department, and be asked if you would examine the time frame in question for potential leads in the investigation. We would then arrange a convenient way to retrieve the information from you.

Please note that we have absolutely zero access to your cameras, and that by participating in this program, your participation always remains 100% voluntary.

Your information will be kept safe and secure, and never made public. Only local law enforcement can view the video surveillance footage.

If you would like to participate in the program by providing your video surveillance footage and allow Officers to contact you, should a crime occur in or near where your cameras are installed, please fill out the online form, or you may call 570-288-3674, for a hard copy to be mailed to you.

If you have any questions, please contact Melanie Sweeney at 570-288-3674, or by email at msweeney@kingstonpd.org

* * Information provided to the Kingston Municipal Police Department regarding your camera systems will be for official use only. Your personal information will be confidential and not for public dissemination. * *

C A P T U R E I N F O R M A T I O N :

Address: _____

Name: _____

Phone number: _____

Email: _____

Business

Residence

C A P T U R E I N F O R M A T I O N

Number of surveillance cameras:

1-3

4-6

7 or more

C A P T U R E D C O V E R A G E :

Front Yard

Back Yard

Driveway

Front Door

Back Door

Side Door

East Side of House

West Side of House

North Side of House

South Side of House

Retention Period:

Less than one week

Two to three weeks

Less than a month

More than one month

Additional Information:
