## **AGREEMENT FORM**

City of Racine Residential Security Camera System Pilot Program

Reimbursement Agreement

Reimbursement Recipient Acknowledgments/Obligations:

- 1. I, \_\_\_\_\_\_ ("Reimbursement Recipient"), will receive a one-time reimbursement in an amount not to exceed \$150, based upon actual costs shown in the attached proof of payment, for the completed installation of a "security camera system" (security camera and a subscription for cloud-based video storage for up to one year) at a residential property in the City of Racine.
- 2. Reimbursement Recipient will be reimbursed for the amount they expended on the security camera system and subscription up to \$150.
- 3. Reimbursement Recipient has a high-speed network connection that meets the requirements of the security camera manufacturer.
- 4. The residence/property must be free of building code violations or tax liens.
- 5. Reimbursement Recipient has received approval of the Residential Security Camera System Pilot Program Reimbursement Application from the City of Racine.
- 6. The security camera system has been installed at the approved location.
- 7. Reimbursement Recipient will register their security camera system with the Racine Police Department as a condition of receiving reimbursement funds.

https://www.cityofracine.org/RPD/CCPRegistration/

- 8. Reimbursement Recipient is expected to contact the police department if there is a crime that they may have footage of and offer their video to the police.
- 9. Reimbursement Recipient agrees that they will retain the security camera system for a minimum of one year unless the system is upgraded at the sole expense of the Reimbursement Recipient. If the Reimbursement Recipient upgrades their security camera system, the Reimbursement Recipient must register the upgraded system with the Racine Police

- Department. The Reimbursement Recipient agrees that it will retain the upgraded system for the remainder of the term.
- 10. Reimbursement Recipient will not be responsible for repaying the funds to the City except in the event that the Reimbursement Recipient has failed to meet their obligations under this Agreement by failing to
  - a. Install the security camera system at all.
  - b. Install the security camera system in the manner approved in the Reimbursement Application.
  - c. Retain the security camera system for a minimum of one year.
  - d. Retain an upgraded security camera system for the remaining balance of the original term after the system was upgraded.
- 11. Reimbursement Recipient will submit one (1) electronically signed copy of this Agreement to the City of Racine.
- 12. In addition to the signed copy of this Agreement, the Reimbursement Recipient must submit the following:
  - a. Confirmation of security camera system registration with the Racine Police Department.
  - b. Proof of payment for purchase and installation of the security camera system. The Reimbursement Recipient will only be reimbursed up to \$150.
  - c. Image(s) of the installed security camera system.

## City Obligations:

- 1. The City hereby agrees to reimburse the Reimbursement Recipient the amount expended on the security camera system not to exceed \$150 if all stipulations have been met according to the City.
- 2. The City is not responsible for any reimbursement-related tax requirements.

## IMPORTANT ALL APPLICANTS MUST READ BEFORE SIGNING.

In no event will the City of Racine be liable for any loss of data, property loss, damage, bodily injury, cost of recovery, or other special, incidental, consequential, indirect, punitive, exemplary, or reliance damages arising from or in relation to this Agreement, however caused and regardless of theory of liability. The Reimbursement Recipient certifies that the above statements are

Residential Agreement Form June 19<sup>th</sup>, 2023

true and accurate to the best of his/her knowledge. The Reimbursement Recipient application to the Program shall remain the property of the City and shall be deemed a public record.

Signatures
APPLICANT INFORMATION
Applicant Name

Applicant Address \_\_\_\_\_

\_\_\_\_\_\_

**Applicant Signature** 

Date