

Commerce SafeCam Program Application

City of Philadelphia, Department of Commerce



PART 1 - APPLICANT INFORMATION

Section A – INDIVIDUALS - Use this section if you are an individual business or property owner.

Address of Property Being Improved _____

ZIP Code _____ Police District _____

Applicant Name (person or company applying for rebate) _____

Applicant's Mailing Address (if different than above) _____ ZIP Code _____

Applicant Business Privilege Tax # _____ EIN or SSN# _____

Contact Person & Title _____

Contact Phone Number _____ Email _____

Name of Business in Property Being Improved _____

Type of Business _____ Number of Employees _____

Legal Name of Property Owner _____

Section B – ASSOCIATIONS - Use this section if you are applying as a Business Association or Community organization to install multiple cameras in a business district.

Location of Business District or Commercial Corridor _____

ZIP Code _____ Police District _____

Name of Applicant Organization _____

Applicant's Mailing Address _____ ZIP Code _____

Organization Business Privilege Tax # _____ EIN or SSN # _____

Contact Person & Title _____

Contact Phone Number _____ Email _____

Type of Businesses in Corridor or District _____

On additional sheet, list the following for every identified camera location:

1. Name of Business, 2. Address, 3. Legal Name of Property Owner

PART 2 – COMMERCE SAFECAM PROJECT PROPOSAL

Describe the camera(s) you plan to install to your storefront. Must meet minimum specifications and describe how system will provide surveillance to public space.

Describe any other security improvements you will be making and the estimated investment (if applicable):

Describe your communication with the local police district (crime prevention officer or other).

PART 3 – COMMERCE SAFECAM PROJECT BUDGET

Use this form to itemize costs of installing surveillance cameras on your business. Identify the contractor(s) you've selected. You must also attach the estimates from your selected contractor(s) and least one additional estimate/bid for each item.

Security/Surveillance Cameras	Cost	Your Selected Contractor/Vendor
	\$	
	\$	
	\$	
	\$	
	\$	
TOTAL Costs for SafeCam Project	\$	

PART 4 - APPLICATION ATTACHMENTS

CHECKLIST -Please attach the following:

- Color photographs of your building clearly showing the following:
 1. Photo of your building with arrows or other clear indications to identify where the camera(s) will be installed;
 2. The entire front facade of your building; and
 3. The views down the block to the right and left of your building of your building.

- Contractor estimates:

Two estimates are required. We recommend you secure at least three. All applicants must seek proposals from businesses owned and controlled by minority persons (MBEs), women (WBEs) or disabled persons (DSBEs) as described below and in the program guidelines. Estimates should detail the camera specifications that meet the program's minimum requirements.

- Letter from building owner (if different from applicant) granting permission to install the proposed security camera system.

PART 5 - REQUIREMENTS

I certify that:

1. The information contained here is accurate.
2. The business and property owner(s) are current with all City obligations, including but not limited to taxes, licenses, water revenue billings etc, as well as any assessments due to Business/Neighborhood Improvement Districts or Special Services Districts. All permits, licenses, environmental and historical requirements associated with the above work will be complied with.
3. I have read and will comply with the requirements outlined in the Commerce SafeCam Program Guidelines.
4. I have made "best and good faith efforts" to include businesses owned and controlled by minority persons (MBEs), women (WBEs) and disabled persons (DSBEs) in the project. Potential M/W/DSBE project participants can be found in the City of Philadelphia's Office of Economic Opportunity Directory of Certified Firms (Contact OEO at 215-686-6232 or review the online directory at <http://www.phila.gov/mbec/directory.asp>) or the Pennsylvania Unified Certification Program's Directory of Disadvantaged Business Enterprises (<http://www.paucp.com>).
5. I will register the surveillance camera(s) with the Philadelphia Police Department's SafeCam program.

APPLICANT OR DESIGNATED REPRESENTATIVE

Name _____ Title _____

Signature _____ Date _____

**Submit your completed application to Phila Dept of Commerce, 1515 Arch St, 12th Fl, Phila, PA 19102
or email Linda.Lawrence@phila.gov or fax to 215-683-2015.**

You will receive a notification by e-mail when your application is received.

NOTE: Applicants must NOT commence work until written approval from the City is received.