ADMINISTRATIVE PROCEDURE FORM 181-1 VIDEO SURVEILLANCE REQUEST



PREAMBLE

AP 181 VIDEO SURVEILLANCE

SITE:
LOCATION: INTERIOR EXTERIOR
SERVICE REQUEST #:
ESTIMATED PROJECT COST: \$
DATE:

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OVERVIEW

1. Project Background and Description

Reason for request: must be based on verifiable, specific incidents of crime, significant safety concerns or other compelling circumstances. This does not include anecdotal evidence or speculation.

2. Project Scope

Project scope defines the boundaries of a project. Include a CAD drawing with camera placement, signage, required cabling and any equipment for viewing recordings or live video.

3. High-Level Requirements

i Describe the high-level requirements for the project:

The finished project must: (expectations)



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4. Affected Business Processes or Systems

i	Describe impacts on site operations: loss of space, power, gas, etc.						

5. Compliance

i	Village approvals, permits, line locates, etc.				
Asbes	Asbestos identification/verification:				
Fire s	Fire seal requirements:				
Other	(approvals, permits, line locates, etc.)				

6. Implementation Plan

Include overview of how you plan on completing this project within budget and on time. What resources are needed? (staff, third-party contractors, materials, special orders, location access, etc.)



7. Coordination with Facilities
Include any work that facilities will have to complete or assist with in this project
8. Equipment and Materials list
List required cost items.



Equipment in stock (journal entry parts etc. – include part numbers where applicable):
•
•
•
•
Equipment requiring purchase acquisition (include relevant part numbers where applicable):
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•
•

9. High-Level Timeline/Schedule

i	Describe what the high-level timeline/schedule will be to plan, design, develop and deploy the project. Generally, when do you expect this project to be started and finished?				

10. Budget

Proceed to costing analysis.



Costing Analysis: Outline the budget costs associated with each cost center?
School Budget Costs: Approved Denied Signature:
1-2-12-140-250998-9998: \$
1-2-12-140-253998-9998: \$
1-2-12-135-345998-9998: \$ OTHER 1-2-12998-9998: \$
Comments:
I.T. Budget Costs: Approved Denied Signature:
1-2-12-140-250330-9998: \$
1-2-12-140-253330-9998: \$
1-2-12-135-345330-9998: \$
OTHER 1-2-12330-9998: \$
Comments:
Facilities Budget Costs: Approved Denied Signature:
1-2-13-145-401-XXX-330-9998: \$
1-2-13-145-401-XXX-998-9998: \$
Comments:

APPROVAL AND AUTHORITY TO PROCEED

We approve the project scope, timelines, budget costs and final outcomes.



Name	Title	Date	Signature	Approval
	Principal			Approved: □ Denied: □
	Superintendent			Approved: □ Denied: □
Todd Forbes	Supervisor of Technology			Approved: □ Denied: □
Bob Tough	Supervisor of Facilities			Approved: □ Denied: □
Jennifer Williamson	Director of Education			Approved: □ Denied: □