

LOUISIANA
DEPARTMENT OF INSURANCE

**LOUISIANA AUTOMOBILE
THEFT AND INSURANCE
FRAUD PREVENTION
AUTHORITY**

**LICENSE PLATE READER INSTRUCTIONS AND
SELECTION APPLICATION**



**THE POYDRAS
BUILDING**
1702 North Third St.
Baton Rouge, LA 70802
225.219-0452

SELECTION APPLICATION INSTRUCTIONS

The *Louisiana Automobile Theft and Insurance Fraud Prevention Authority (LATIFPA)* is accepting applications from Louisiana law enforcement agencies for the purpose of awarding license plate readers to qualifying agencies. Funding will be provided to the National Insurance Crime Bureau (NICB) for the applicant most qualified under the award guidelines and requirements. Please take time to read the Selection Application Instructions thoroughly before starting the online Selection Application process.

Each approved law enforcement agency, upon receipt of the License Plate Reader award, shall receive the following equipment:

- License Plate Reader – Includes LPR Processor, multiple cameras, cables and related software and mounts
- Installation of system will include software to the selected law enforcement agency with jurisdiction and enforcement of toll bridges and/ or tunnels
- Mounting system
- Technical Support

LAW ENFORCEMENT SELECTION APPLICATION

The Selection Application will consist of a cover page requesting contact information, a statement of the problem, projected goals and objectives and an assessment of existing support.

COVER PAGE

The cover page requesting contact information must include

The name of the organization responsible for administering the program in accordance with all accountability standards set forth by the *Louisiana Automobile Theft and Insurance Fraud Prevention Authority* and the National Insurance Crime Bureau.

The municipal address of the organization.

The type of organization (law enforcement organizations, such as police department, sheriff's office or task force).

The organization's IRS Tax Identification Number (F.E.I.N.).

The authorized official for the organization including name, title, address, direct phone number including extensions and e-mail address.

The official responsible for submitting accountability requirements on behalf of the organization if different from the authorized official, including name, title, address, direct phone number including extensions and e-mail address.

The official responsible for the day to day operations of the project on behalf of the organization, if different from the authorized official and the official responsible for submitting accountability requirements, including name, title, address, direct phone number including extensions and email.

STATEMENT OF THE PROBLEM

(See Part V)

The statement of the problem must be included for your city or Parish:

The number of stolen vehicles in the past year including theft and recovery percentages and the number of stolen plates reported.

An estimate of cost per year the problem may have on the applicant’s city, parish, or community that is applying for a license plate reader.

A list of other programs, presently in place, that may address the problem.

PROJECTED GOALS AND OBJECTIVES

(See Part VI)

The projected goals and objectives must include:

A list of the organizations goals and objectives as it pertains to the use of a license plate reader in your agency.

A statement of how a license plate reader will assist in accomplishing the organizations goals and objectives.

A plan of the organization’s description of how it will accomplish its goals and objectives.

A list of other programs presently in place, if applicable, that may have a positive impact on accomplishing the current goals and objectives of the organization as outlined by the grant criteria.

ASSESSMENT OF EXISTING SUPPORT

(See Part VII)

An assessment of existing support within the organization must include:

The number of personnel available to accomplish the requirements of the application.

A list of all equipment i.e. vehicles equipped with a Mobile Data Terminal (MDT) that will be available to support the operation.

An assessment of network capabilities for any program requiring computer software compatibility.

A description of the applicant’s experience and/or qualifications that demonstrate a capability to successfully operate a license plate reader.

A description of the plan used to evaluate the use of a license plate reader by your organization.

Any relevant data that will be used to measure the effective use of a license plate reader in your jurisdiction.

A statement of the organization’s willingness to enter into a “License Plate Reader Use Agreement and A Special Operations Plan” with the National Insurance Crime Bureau (NICB) to be eligible for consideration for this specific program.

A disclosure of the funding sources used to accomplish similar goals and objectives of the organization, including funding cycles and funding durations (If applicable).

LOUISIANA DEPARTMENT OF INSURANCE
Selection Application for Louisiana Automobile Theft and Insurance Fraud Prevention Authority
License Plate Reader Program

One original copy of the Selection Application, signed by your organizations authorized official, must be received by our office at the following address:

Louisiana Department of Insurance
Louisiana Automobile Theft and Insurance Fraud Prevention Authority
P. O. Box 94214
Baton Rouge, Louisiana 70804-9214

Incomplete applications will be disqualified

All applications must be typed

Applications may be obtained and filled out online by accessing our Website at www.lidi.la.gov/latifpa, however all applications must be printed, signed and mailed to the above listed address

Applications not signed by the authorized official will be disqualified

SELECTION APPLICATION

PART I

Name of Organization:

Municipal Address:

Building, Floor, Suite No:

City:

State:

ZIP Code:

Parish:

Type of Organization:

Tax Identification Number:

PART II

Person designated to sign on behalf of the organization as their authorized official.

Name:

Title:

Address:

City:

State:

ZIP Code:

Direct Phone Number:

E-mail Address:

PART III

Person responsible for submitting accountability requirements for the organization, if different from authorized official.

Name:

Title:

Address:

City:

State:

ZIP Code:

Direct Phone Number:

E-mail Address:

PART IV

Person responsible for the day-to-day operations of the project for the organization, if different from the authorized official or the person responsible for accountability requirements.

Name:

Title:

Address:

City:

State:

ZIP Code:

Direct Phone Number:

E-mail Address:

PART V

The organization must submit a brief statement of how a license plate reader would benefit its agency.



PART VI

The organization must give a statement of the existing goals and objectives to be achieved as a result of obtaining a license plate reader for use in its jurisdiction.

Empty response box for the organization's statement of goals and objectives.

PLEASE PROVIDE AN ASSESSMENT OF THE ORGANIZATION'S EXISTING SUPPORT STRUCTURE NEEDED TO ACHIEVE THE OBJECTIVES OF THE PROJECT.



1. Will the organization be able to provide all personnel expenses, including salaries, overtime, healthcare benefits during the period of operation of the license plate reader?

Yes

No

2. Will your organization be able to provide all incidental expenses associated with implementation and sustainability of the program (See Page 15).

Yes

No

3. Will the organization be able to perform an assessment of network capabilities for specific programs requiring computer and software compatibility?

Yes

No

4. Will the organization be willing to enter into an Agreement of Understanding with the National Insurance Crime Bureau for specific automobile theft prevention programs? **

Yes

No

5. Does the organization have existing equipment such as necessary vehicles to compliment a license plate reader?

Yes

No

If yes, please list this equipment:

6. Will your organization be able to perform the installation of necessary equipment to conduct a license plate reader in your jurisdiction?

Yes

No

**** REFERENCE NICB LPR USE AGREEMENT AT THE END OF THIS APPLICATION**

ADDITIONAL ASSESSMENT QUESTIONS

7. Does your organization currently have funding available for a license plate reader?

Yes

No

If yes, what are the sources, funding cycles or duration of funding?

8. What method of reporting crime statistics does your organization use? **

9. What is the number of officers/personnel available to operate a license plate reader? How many are full time? How many are part time?

10. What equipment i.e. vehicles are presently available in your organization to support a license plate reader operation?

11. What qualifications and/or experience does your organization have to demonstrate a capability to successfully operate a license plate reader?

12. What cities are in your jurisdiction?

**** REFERENCE NICB LPR USE AGREEMENT AT THE END OF THIS APPLICATION**

ADDITIONAL ASSESSMENT QUESTIONS (Continued)

13. What is the population of each city in your jurisdiction?

14. Are there any officers assigned to vehicle theft investigation in your Organization?

15. How many hours per week will your officers be able to commit to the use of a license plate reader?

16. What is the number of vehicles stolen in your jurisdiction within the last two years?

17. What is the number of stolen vehicles recovered in your jurisdiction within the last two years?

18. Does your organization have any existing activities that address vehicle theft in your jurisdiction?

ADDITIONAL ASSESSMENT QUESTIONS (Continued)

19. Does your organization have any existing funding sources to accomplish similar goals and objectives?

20. Describe the plan that will be used by your organization to evaluate the use of a license plate reader?

To the best of my knowledge, the information contained herein is true and accurate.

Signature of Authorized Official

DATE

PART VIII

PLEASE MAIL YOUR COMPLETED APPLICATION TO:

LOUISIANA AUTOMOBILE THEFT AND INSURANCE FRAUD PREVENTION AUTHORITY(LATIFPA)

Louisiana Department of Insurance
P. O. Box 94214
Baton Rouge, Louisiana 70804-9214
Attention: Crystal Stutes, Director

YOU MAY HAND DELIVER THE COMPLETED APPLICATION TO:

LOUISIANA AUTOMOBILE THEFT AND INSURANCE FRAUD PREVENTION AUTHORITY(LATIFPA)

Louisiana Department of Insurance
The Poydras Building
1702 North Third Street
Baton Rouge, Louisiana 70802
Attention: Crystal Stutes, Director
or
Kevin Smith, Assistant Director

If you have any questions, please contact the staff of the Louisiana Automobile Theft and Insurance Fraud Prevention Authority listed below.

Crystal Stutes, Director
1702 North Third Street
Baton Rouge, Louisiana 70802
Ph: 225.342.4311
crystal.campbell@ldi.la.gov

Kevin Smith, Assistant Director
1702 North Third Street
Baton Rouge, Louisiana 70802
Ph: 225.219.0452
kevin.smith@ldi.la.gov

**USE THIS EXTRA PAGE FOR ANY ADDITIONAL SPACE NEEDED FOR
PARTS V, VI AND VII**

THE FOLLOWING EQUIPMENT/ACCESS MUST BE PROVIDED BY THE QUALIFYING AGENCY:

- **Mobile Data Terminal (MDT)**
- **Internet Access to download the NICB stolen vehicle data to the LPR and the ability to share stolen vehicle hits with officers in the field so that stolen vehicles that are identified may be intercepted and recovered.**
- **A Two (2) gigabyte thumb drive**

STATISTICAL LPR DATA REPORTING REQUIREMENTS:

- **To be in compliance with LATIFPA LPR program requirement, your agency agrees to comply and commit to submit monthly reports to the National Insurance Crime Bureau (NICB) as outlined in their LPR Use Agreement.**

By signature, your agency agrees to comply fully with the above statement.

Signature of Authorized Official

DATE

LICENSE PLATE RECOGNITION USE AGREEMENT

In furtherance of its mission of fighting insurance-related crime and fraud, including vehicle theft, the National Insurance Crime Bureau ("NICB") hereby donates the use of a License Plate Recognition System ("LPR") to ("Agency") subject to the following conditions:

1. Agency shall have the use of the LPR, serial number _____ for a period of _____ months, commencing _____ and ending on _____. Agency shall only use the LPR for legal and permitted uses.
2. If Agency is not sufficiently deploying the LPR, NICB may terminate this agreement prior to the ending date and Agency will return the LPR to NICB.
3. The NICB has assigned special agent _____ to work with Agency in the implementation and use of the LPR, and as a liaison with the Agency. Contacts with the NICB, including reports should be primarily through the assigned special agent.
4. Agency shall return the LPR to the NICB in proper working order, reasonable wear and tear excepted.
5. The designated law enforcement agency is required to maintain a current maintenance agreement on the equipment at all times.
6. Agency will take reasonable care of the LPR while it is in its possession and it shall reimburse the NICB for the value of the LPR if it is lost, stolen or substantially damaged while in the Agency's possession. NICB is not responsible for providing a replacement LPR should the LPR referenced in this Agreement become lost, stolen, substantially damaged or otherwise inoperable.
7. Agency will use the LPR in locations mutually agreed upon with the NICB.
8. Agency agrees to commit sufficient personnel to facilitate the use of the LPR. The NICB is not responsible for the payment of any wages, benefits or any other consideration to the Agency's personnel using the LPR.
9. Agency shall be responsible for providing NCIC and/or any state stolen vehicle files on a daily basis for use with the assigned LPR system.
10. Agency shall provide to the NICB, on a monthly basis, all pertinent information concerning vehicle recoveries and other law enforcement activity, attributable to the use of the LPR system, including, but not limited to; year, make, model, VIN number, location, date, time, whether vehicle was moving or stationary, whether an arrest(s) was made and all charges brought.

SAMPLE

11. Agency shall purge its records after no longer than 60 days of all information generated by the LPR not related to a vehicle recovery or an ongoing criminal investigation.
12. Agency shall protect, defend and indemnify NICB, its member companies, officers, agents and employees for and against any and all claims, losses, damages, liabilities, judgments and actions, of any kind or nature, including reasonable attorney's fees arising out of NICB's furnishing the LPR to the Agency and Agency's use of the LPR.
13. No press release shall be issued by either party that mentions the other party without the other party's written consent.
14. Any modification of this Agreement, including extending the ending date of the Agreement, must be in writing and signed by both parties.

Agency:

National Insurance Crime Bureau:

By: _____
Name of Signer

By: _____
Name of Signer

Title

Title

Date: _____

Date: _____