

**Kewaunee County Sheriff's Department ~ Jail Division**  
**Electronic Monitoring Equipment Responsibility Acknowledgment**

The equipment used for the Electronic Monitoring Program is the property of the Monitoring Company under current contract with the Kewaunee County Jail.

This equipment is provided to you for the use of the program. You are expected to care for the equipment. Any damage that is incurred by you, or while you are on the program, is your responsibility. You will be required to pay for any damages and the amount will be deducted from your account. Any misuse or intentional damage to any of the equipment may result in criminal charges. Suspension / Revocation of Huber privileges and / or the monitoring program itself may occur if you do not properly maintain the equipment.

- I \_\_\_\_\_ understand that I am being provided with electronic monitoring equipment for use while I am on the Electronic Monitoring Program. *Initials*\_\_\_\_\_
- I understand that this equipment remains the property of the Kewaunee County Jail and / or the company under contract with the Kewaunee County Jail. *Initials*\_\_\_\_\_
- I understand that while this equipment is in my possession, that I am responsible for the care and general condition of the equipment and accept responsibility for maintaining it. *Initials*\_\_\_\_\_
- I further understand that if any damage is done to this equipment, I will make restitution to the Kewaunee County Jail for it's repair or replacement. This includes any damage while in my care either accidental or intentional and caused by either myself or others. *Initials*\_\_\_\_\_
- I understand that any amount that is needed to repair or replace the equipment will be deducted from my jail account or billed to me. *Initials*\_\_\_\_\_
- I further understand that if I do not comply with these requirements, that I may be charged criminally and / or my Huber and Electronic Monitoring Status may be suspended or revoked. *Initials*\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Huber Officer

\_\_\_\_\_  
Date