PHOTOGRAPH REPRODUCTION POLICY

The Library holds a collection of approximately 2000 historic photographs, mainly a gift of the Palos Verdes Homes Association. These have been digitized and may be browsed on the PVLD website at www.pvld.org/localhistory. Higher resolution commercial quality TIFF files are available for download. See price list and requirements printed below. [Trustee Policies & Procedures Manual Sec. 5030.0] Reproduction with personal cameras and/or scanners is prohibited, but images may be copied on the photocopy machine for personal research.

Fees:
Individual Use:
   $10 per image for local resident (90274, 90275 zip codes)
   $25 per image for non-resident

Commercial Use: (For-profit OR Non-profit)
   $25 per image for local business or organization (90274, 90275 zip codes)
   $50 per image for non-local business or organization
[Note: Fees may be modified only with approval of the District Director.]

The photo collection is intended for personal research, scholarly or educational use. Permission is granted for a one-time use only. Any further reproduction, redistribution, publication, exhibit or other use without prior written permission from the Palos Verdes Library District is prohibited.

All orders are to be pre-paid and all sales are final. To order images, complete the Photo Reproduction Order Form. Payment may be made by check, cash, credit card, or email invoice. Make checks payable to the Palos Verdes Library District.

You will be notified by email when your order is ready.

Allow 5 business days for completion.

For questions, send email to dcampbell@pvld.org.

PVLD PHOTOGRAPH REPRODUCTION ORDER FORM

Date of request ______________   Received by _____________
Name of requestor_________________________________________________________
Name of Company_________________________________________________________
Address ________________________________________________________________
How will the photographs be used? (Please be specific.)

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<th>Photograph Information (Limit 10 per request)</th>
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Total Fee $________

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I confirm that the information I have provided is correct, and that I have read and accept the conditions of use.

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Signature of applicant

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Date

Payment by: Check ___ Cash ___ Credit Card (Visa, MasterCard) ___ Email Invoice ___

FOR IN PERSON PURCHASES ONLY

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Card holder Name

Card # ______________________ Expiration Date_______ Zip Code_______ Security Code_________

Date Completed _______ By Staff________

Updated March 2022