

NO. _____

REQUEST FOR SECURITY CHECK

NO. _____

ADDRESS _____ NAME _____

DEPARTURE DATE _____ RETURN DATE _____

PROBABLE ROUTE OF TRIP _____

TYPE OF PREMISE: RESIDENCE [] BUSINESS [] OTHER [] _____

HAVE KEYS BEEN LEFT WITH ANYONE? YES [] NO []

IF YES, NAME(S) & PHONE NUMBERS:

IN CASE OF EMERGENCY DO YOU WISH TO BE NOTIFIED BY COLLECT CALL? YES [] NO []

C/O NAME _____ ADDRESS _____ PH# _____

I REQUEST A SECURITY CHECK TO BE MADE OF MY PREMISES AND **AGREE TO NOTIFY YOU OF MY RETURN.**

SIGNED _____ DATE OF REQUEST _____

DEPUTY SECURITY CHECK REPORT

DATE	TIME	STATE IF PREMISES WERE SECURE OR DESCRIBE OTHER	DEPUTY INITIALS

PLEASE WRITE DIRECTIONS TO YOUR HOME: _____

WILL YOU HAVE AUTOMATIC LIGHTS OR TIMERS ON? WHAT TIME? _____

DO YOU HAVE DOGS? YES [] NO []

DO THEY BITE (AGGRESSIVE)? YES [] NO []