

Merchantville Police Department
REQUEST FOR SECURITY CHECK

****SECURITY CHECKS WILL BE CONDUCTED RANDOMLY AS PATROL AVAILABILITY ALLOWS****

Address to be checked - _____

Name(s) of Owner - _____

Contact Phone # - _____ Departure Date - _____ Return Date - _____

Emergency Contact / Keys Yes No
If yes – Name / Address / Phone #

Will there be any lights left on / Timers? Yes No
If yes – Location in house & when they will be on.

Will there be any vehicle on the property? Yes No
If yes – Description / Tag / Where

Will anyone be working at or have access? Yes No
If yes – Name / Address / Phone #

Parking Permit Yes No

Mail & Paper Stopped? Yes No

I request a security check to be made of my premises and agree to notify you of my return.

Signature of Person Requesting Security Check

Date Requested