Munford Police Department

Request for Security Check

Name:			Phone Number:		
Address:					
Departure Date:			Return Date:		
Type of Premises		Residence ()	Business ()	Other:	
Have the keys been left with anyone? Y/N					
	Name:		Phone Number:		
Will anyone be working or have access to residence during your absence? Y/N					
Name:		Phone Number:			
In case of emergency do you wish to be notified (All Hours) Y/N					
Irequest a security check of my residence of my premises while I am away.					
Signature:			Date:		
Officer Security Check Report (filled out by officer)					
Date	Time	Sta	ate of premises		Officers Name

State if you entered and checked premises. Any evidence of Burglary, Vandalism or Theft, officer must complete a separate report.