COTTONWOOD COUNTY SHERIFF'S OFFICE

NO. _____ REQUEST FOR SECURITY CHECK

ADDRESS _____ NAME _____ PHONE # _____

DEPARTURE DATE _____ RETURN DATE _____

PROBABLE ROUTE OF TRIP _____

TYPE PREMISES: ☐ RESIDENCE ☐ BUSINESS ☐ OTHER: _____

HAVE KEYS BEEN LEFT WITH ANYONE? ☐ YES ☐ NO
IF YES, NAME _____ ADDRESS _____ PHONE # _____

WILL ANYONE BE WORKING ABOUT OR HAVE ACCESS TO PREMISES DURING YOUR ABSENCE? ☐ YES ☐ NO IF YES, NAME(S): _____

Will there be any lights left on? ☐ YES, Location: _____ ☐ NO Timer? ☐ Yes ☐ No
Will any vehicles be left in driveway or area? ☐ YES, Type and License Number _____
☐ NO

IN CASE OF EMERGENCY DO YOU WISH TO BE NOTIFIED BY COLLECT CALL: ☐ YES ☐ NO
C/O NAME _____ ADDRESS _____ PHONE # _____

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

SIGNED _____ DATE OF REQUEST _____

OFFICER'S SECURITY CHECK REPORT

DATE	TIME	STATE IF PREMISES WERE SECURE OR OTHER*	OFFICER'S INITIALS

*If premises were unsecure or evidence of forced entry present state if you entered and checked premises.
If you found any evidence of vandalism or theft make separate report.