

PROPERTY CHECK REQUEST FORM

West Sadsbury Township Police
4119 West Lincoln Highway
Parkesburg, PA 19365
Phone 610-857-5688 Fax 610-857-5621
Email: police@wsadspd.org

Last Name: _____ First Name: _____ MI _____

Address: _____ City: _____ Zip: _____

Phone Number: (____) _____ Cell Number: (____) _____

Date / Time Leaving: _____ Date / Time Returning: _____

Alarm System (Yes / No) Lights on Timer (Yes / No) Pets on Premise (Yes / No)

Alarm Company Name _____

Alarm Company Phone Number: _____

Emergency Contact Info

Contact #1 Name: _____

Contact #1 Address: _____

Contact #1 Phone Number: (____) _____

Contact #1 Name: _____

Contact #1 Address: _____

Contact #1 Phone Number: (____) _____

Authorized Personnel on Premises:

Name: _____ Phone # _____

Name: _____ Phone # _____

Authorized Vehicles on Premises

Make: _____ Model _____ Color: _____ License # _____

Make: _____ Model _____ Color: _____ License # _____

Notes: _____

Please complete the form and then email, fax or drop off at the police station