

**Holden Beach Police Department
Keep /Welfare Check Request Form**

Name: _____ Phone # _____

Address: _____

Begin Date/Time: _____ / _____ (Max. 14 days) End Date/Time: _____ / _____
(Maximum Keep Check period is 14 days unless expressly approved by Chief/designee)(DVPO time frame should equal DVPO Court Order)

Check Reason: ____ Vacation ____ Past Crimes ____ Construction ____ Other _____

Travel Destination Address: _____

Alternate Phone Number(s) for Destination: _____

Parties Allowed on Property

Name: _____ Phone # _____

Name: _____ Phone # _____

Name: _____ Phone # _____

Name: _____ Phone # _____

Property Details

Lights On In: ____ Living ____ Bedrooms ____ Dining ____ Kitchen ____ Garage ____ Den ____ Other

Timers Present: ____ Y ____ N Alarm System: ____ Y ____ N Camera System: ____ Y ____ N

Pets at Property ____ Y ____ N Describe: _____

Vehicles at location: ____ Y ____ N ____ Outside ____ In Garage ____ Under House

Veh. 1 Make _____ Model _____ Color _____ Lic. Plate # _____ Lic. State _____

Veh. 2 Make _____ Model _____ Color _____ Lic. Plate # _____ Lic. State _____

Veh. 3 Make _____ Model _____ Color _____ Lic. Plate # _____ Lic. State _____

Veh. 4 Make _____ Model _____ Color _____ Lic. Plate # _____ Lic. State _____

Special Instructions: _____

First Emergency Contact/Keyholder Name: _____

Physical Address: _____

Phone Number: _____ Alt Phone Number: _____

Contact notified of absence: ____ Y ____ N

Second Emergency Contact/Keyholder Name: _____

Physical Address: _____

Phone Number: _____ Alt Phone Number: _____

Contact notified of absence: ____ Y ____ N

(Please turn over and complete back of form)

Acknowledgement

By signing this form, I understand and acknowledge that the Holden Beach Police Department is not offering any special duty or property protection for the location or persons indicated herein and that the only services I will receive are those exclusively associated with normal police duties which may include a more thorough check of my property in my absence. I further acknowledge that the Holden Beach Police Department is assuming no liability whatsoever in connection with this request.

I further acknowledge all of the following by initialing each block:

_____ -This check request expires 14 days from the beginning date above(Unless DVPO attached), and

_____ -I must notify Holden Beach Police Department of any changes to this form while it is active, and

_____ -I must notify the Holden Beach Police Department if the property will be occupied in conflict with information on this form.

Property Owner Signature: _____ **Date:** _____

DVPO / No Contact Information (Complete Only if Court Ordered Protection Exist)

Domestic Violence Protection Order (DVPO)/No Contact Order in Place: ____Y ____N

Copy Attached: ____Y ____N

Name of person protected from: _____

Current Address: _____

Date of Birth: _____ Phone #(s): _____

Physical Description (Height, Weight, Race, Sex, Hair Style, Color, Eye Color, Corrective lenses, Normal Wardrobe Habits, Scars, Tattoos, other pertinent feature(s)): _____

Vehicle(s) owned/operated by subject:

Veh. 1 Make _____ Model _____ Color _____ Lic. Plate # _____ Lic. State _____

Distinct Features(Dents, Stickers, Accessories): _____

Veh. 2 Make _____ Model _____ Color _____ Lic. Plate # _____ Lic. State _____

Distinct Features(Dents, Stickers, Accessories): _____