

## HORIZON CITY POLICE DEPARTMENT SECURITY CHECK REQUEST

ADDRESS		NAME		
	PHONE			
REASON FOR EXTRA	A PATROL			
TYPE OF PREMISE: BUSINESS RESIDENCE OTHER				
PROTECTED BY ALARM SYSTEM: YES NO IF YES, TYPE OF ALARM				
LIGHTS ON: YES	NO CONSTA	NT OR TIMED		
VEHICLES: YES	_ NO			
DESCRIPTION OF VE	EHICLES LEFT:			
WILL KEYS BE LEFT	WITH ANYONE? YES	NO		
IF YES, WITH WHOM	1? NAME			
ADDRESS:	SS:PHONE:			
OTHER PERSON TH	AT WILL HAVE ACCES	S TO THE PREMISES (R	ELATIVES, WORKERS,	
NEIGHBORS, EMPLO	OYEES)			
ANV DETS ON THE		NO INSIDE	OLITSIDE (CIRCLE)	
			S FROM	
O AND I WILL NOTIFY UPON MY RETURN. SIGNED DATE OF REQUEST				
<u></u>		<i>D</i> /(12.0) TIEC	<u></u>	
DATE CHECKED	SEQUENCE#	DATE CHCKED	SEQUENCE#	