



Marshall Police Department – Request for Security Check

Date: _____

Name _____

Phone: _____

Address: _____

Departure Date: _____

Return Date: _____ Destination: _____

Residence ___Business___

Security System: Yes ___ No ___

Mfg of Security System: _____

Automatic Lights: ___Yes ___ No If yes, location: _____

Have keys been left with anyone? ___ Yes ___x___ No If yes, name: _____

Phone #: _____

Address: _____

Will anyone be working about or have access to your premises during your absence?
___yes ___no If yes, name: _____

In case of emergency, do you wish to be notified? ___yes ___no Cell # : _____

Email address(es) to contact you: _____

I request that a security check be made of my premises and agree to notify you of my return:

Signed: _____ Date: _____

Resident: This security check service in no way guarantees that your property will be safe from vandalism or burglary, but merely provides the police department with information of your whereabouts and other pertinent facts should a crime occur.

Officer's Security Check Report

Date	Time		

Security check continued on back of form

