ROSELLE POLICE DEPARTMENT
Request for Security Check

☐ **RESIDENCE** ☐ **BUSINESS** **Sector:** **Case:**
Address: **Departure Date:** **Return Date:**
Owner Name: **Phone #:**
Will anyone be on the premises? ☐ NO ☐ YES If yes, who:
Does anyone have keys to building? ☐ NO ☐ YES If yes, who:
Will automatic light timers be used? ☐ NO ☐ YES Will alarm/security system be used? ☐ NO ☐ YES
IN CASE OF EMERGENCY, PLEASE CONTACT:
Name: Phone #:
Address: ☐ They will respond if necessary.
Do YOU wish to be contacted in the event of an emergency? ☐ NO ☐ YES
Your vacation address: Phone #:

NOTICE

I am aware that this security check does not guarantee that my property will be safe from vandalism or burglary. It does provide the Roselle Police Department with information on my whereabouts and pertinent facts in the event that a crime or other emergency occurs in my absence.

I further authorize the Roselle Police Department to enter onto my property for purposes of conducting security checks when time and manpower permit. I will notify the Roselle Police Department upon my return.

Signature: Date:
Reviewed by: Entered by:

OFFICERS SECURITY CHECK REPORT

DATE	TIME	STATE OF PREMISES/SECURE OR OTHER	OFFICERS INITIALS