# 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 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 |
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