

EAGAR POLICE DEPARTMENT
REQUEST FOR SECURITY CHECK

DATE _____	
NAME: _____	PHONE#: _____
ADDRESS: _____	
DEPARTURE DATE: _____	RETURN DATE: _____ DESTINATION: _____
AUTOMATIC LIGHTS: NO__ YES__ IF YES, LOCATION _____	
HAVE KEYS BEEN LEFT WITH ANYONE? YES__ NO__ PHONE# _____	
IF YES, NAME: _____ ADDRESS: _____	
DESCRIPTION OF VEHICLE LEFT ON PROPERTY: _____	
WILL ANYONE BE WORKING AROUND OR HAVE ACCESS TO PREMISES DURING YOUR ABSENCE? YES__ NO__ IF YES, NAME(S): _____	
IN CASE OF EMERGENCY DO YOU WISH TO BE NOTIFIED ? <small>(This will be a collect call)</small> YES__ NO__	
C/O NAME: _____	ADDRESS _____ PHONE# _____

DEAR 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 the pertinent facts if a crime should occur.

Have a safe journey and please call us upon your return at 928-333-4127 to be removed from our list.

I REQUEST A SECURITY CHECK BE MADE OF MY PREMISES AND AGREE TO ALLOW EMPLOYEES OF THE EAGAR POLICE DEPARTMENT TO:

- ENTER MY PROPERTY AND,
- IF NECESSARY, MY RESIDENCE OR
- ANY BUILDINGS ON MY PROPERTY
- AND TO NOTIFY YOU OF MY RETURN

I HOLD THE TOWN OF EAGAR, THE EAGAR POLICE DEPARTMENT AND IT'S AGENTS HARMLESS FOR ANY INJURY OR DAMAGE THAT MY OCCUR DURING MY ABSENCE.

SIGNED _____

DATE _____