

SECURITY CHECK

NAME: _____ PHONE: _____

ADDRESS: _____

RESIDENCE: _____ BUSINESS: _____ OTHER: _____

KEYHOLDER: _____ PHONE: _____

PERSONS HAVING ACCESS TO PROPERTY: _____

EMERGENCY PHONE NUMBER FOR OWNER: _____

OTHER CONTACT: _____

VEHICLE(S) LEFT IN DRIVEWAY OR GARAGE: _____

TIMER LIGHTS AND LOCATIONS: _____

ALARM COMPANY: _____

OTHER PERTINENT INFORMATION: _____

DEPARTURE DATE: ___/___/___ RETURN DATE ___/___/___

TAKEN BY: _____ DATE: ___/___/___

**REMIND CALLER TO NOTIFY
NON-EMERGENCY 9-1-1 UPON RETURN
(330) 675-2730**

Officer's Security Check Report on reverse