



Apple Creek Police Department

63 East Main Street
 Apple Creek, Ohio 44606
 Phone: (330) 698-5811 Fax: (330)778-0099

Security Check Request Form

Today's Date: _____

Request Made By _____

Requester's Phone Number _____

Address To Be Checked _____

Rented

Owned

Reason For Extra Patrol:

Premise will be vacant:

Other:

Type of Premises:

Business:

Residential:

Other:

Protected by an Alarm System?

Yes:

No:

Type: _____

Lights Going to be On?

Yes:

No:

Unknown:

Auto:

Keys Going to Left With Anyone?

Yes:

No:

Relation	Name	Address	Phone
----------	------	---------	-------

Other Persons That Will Have Access To The Premises: (Relatives, Workers, Neighbors, etc...)

Relation	Name	Address	Phone
----------	------	---------	-------

Relation	Name	Address	Phone
----------	------	---------	-------

Relation	Name	Address	Phone
----------	------	---------	-------

IN CASE OF AN EMERGENCY DO YOU WISH TO BE NOTIFIED:

Yes:

No:

C/O NAME _____

Address _____

Phone _____

I REQUEST THAT A SECURITY CHECK BE MADE OF MY PREMISES FROM THE FOLLOWING DATES:

Start Security _____

UNTIL _____

End Security _____

AND I WILL NOTIFY UPON MY RETURN.

Printed Name _____

Signed Name _____

Date _____

OFFICER'S SECURITY CHECK LOG

DATE	TIME	PREMISES SECURE CHECK (if not state type report filed/action taken)	Officer's Unit #