PRINT RESET FORM

**WATERVILLE POLICE DEPARTMENT**
**HOME SECURITY CHECK REQUEST**

**CARD NUMBER: _____**

**OWNER INFORMATION**

Name: _____ Address: _____ Phone: _____

☐ Emergency Notification by Collect Call: Name: _____ Phone Number: _____

**DATE & TYPE**

Leaving: _____ Returning: _____ Type: ☐ Vacation ☐ Vacant ☐ Extra Eye ☐ Other _____

**ACCESS**

Key Holder: ☐ Yes ☐ No Name: _____ Phone: _____

Other: ☐ Yes ☐ No Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

**BUILDING INFORMATION**

☐ Night Light ☐ Timer ON _____ OFF _____ Location: _____

ON _____ OFF _____ Location: _____

☐ Animals on Premises: ☐ Dog ☐ Cat ☐ Other _____ Location: _____

☐ Vehicles in drive: _____ ☐ Vehicle in garage: _____

I Request A Home Security Check Be Made, And Agree To Notify The Waterville Police Department Upon My Return

Signature: _____ Date: _____

| DATE | TIME | OFFICER | DATE | TIME | OFFICER | DATE | TIME | OFFICER | DATE | TIME | OFFICER | DATE | TIME | OFFICER |
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TOTAL: _____