~ Beaufort Police Department ~
Residential-Business Security Check

ADDRESS: _____ NAME: _____

REQUEST MADE BY: _____ PHONE: _____

(CIRCLE ONE)
REASON FOR EXTRA PATROL: PREMISE WILL BE VACANT OTHER _____

(CIRCLE ONE)
TYPE OF PREMISE: BUSINESS RESIDENCE OTHER _____

(CIRCLE ONE)
PROTECTED BY ALARM: NO YES IF YES TYPE? _____

(CIRCLE ONE)
LIGHTS ON: YES NO **IF YES, CONSTANT:** YES NO **AUTOMATIC:** YES NO

KEYS LEFT WITH: _____

ADDRESS: _____ PHONE: _____

OTHERS THAT WILL HAVE ACCESS TO THE PREMISES (RELATIVES, FRIENDS ETC)
OTHER INFORMATION REGARDING PREMISES:
_____
_____
_____

(CIRCLE ONE)
IN CASE OF EMERGENCY, WOULD YOU LIKE TO BE CONTACTED? YES NO

C/O _____ ADDRESS: _____

PHONE: _____
(CIRCLE ONE)
I REQUEST THAT A SECURITY CHECK OF MY: RESIDENCE BUSINESS
BE MADE ON THE FOLLOWING DATES _____ UNTIL _____ I WILL NOTIFY THE POLICE DEPARTMENT WHEN I RETURN.

SIGNED: _____ DATE: _____

OFFICERS SECURITY CHECK REPORT

DATE	TIME	FINDINGS	OFFICER ID