Parma Police Department

Premises Security Check Request

Name: _____ Phone: _____

Address: _____

Reason for Extra Patrol : _____

_____

Dates requested: _____

Type of Premises: ☐ Business ☐ Residence ☐ Other: _____

Protected by Alarm System ☐ Yes ☐ No

Will there be lights on in the premises? ☐ Yes ☐ No Where: __

_____

Dogs on Premises: ☐ Yes ☐ No

Vehicles on Premises: _____

Names of persons with access to your property while you are away: _____

_____

In case of emergency do you want to be notified? ☐ Yes ☐ No

Telephone number where you can be reached: _____

Signed: _____ Date of Request _____

If you desire a record of security Checks conducted, it may be obtained from the Police Department where it will be kept on file for one calendar month following your return.

Officers' Security Check Report							
Date	**Time**	**Off.**	**Notes**	**Date**	**Time**	**Off**	**Notes**