Williamsville Police Dept. ** 217-566-3634 **
Request for Security Check

NO. _____

ADDRESS _____ NAME _____ PHONE # _____

DEPARTURE DATE_____ RETURN DATE _____

PROBABLE ROUTE OF TRIP _____

TYPE PREMISES: RESIDENCE ___ BUSINESS ___ OTHER ___ _____
LIGHTS ON: YES ____ NO ____ CONSTANT: YES ____ NO ____ AUTOMATIC: YES ____ NO ____

HAVE KEYS BEEN LEFT WITH ANYONE? YES ___ NO ___

IF YES, NAME _____ ADDRESS _____ PHONE # _____

WILL ANYONE BE WORKING ABOUT OR HAVE ACCESS TO PREMISES DURING YOUR ABSENCE? _____

IF YES, NAMES _____
_____

I REQUEST A SECURITY CHECK BE MADE OF MY PREMISES AND AGREE TO NOTIFY YOU OF MY RETURN.

SIGNED _____ DATE OF REQUEST _____
……

OFFICER'S SECURITY CHECK REPORT

DATE	TIME	STATE IF PREMISES WERE SECURE OR OTHER	OFFICER'S INITIALS

*IF PREMISES WERE UNSECURE OR EVIDENCE OF FORCED ENTRY PRESENT STATE IF YOU ENTERED AND CHECKED PREMISES. IF YOU FOUND ANY EVIDENCE OF VANDALISM OR THEFT MAKE SEPARATE REPORT. *updated 12/3/15*