

**NICEVILLE POLICE DEPARTMENT
HOUSE CHECK / EXTRA PATROL**

PHONE# _____ NAME: _____

ADDRESS: _____

REQUEST MADE BY: _____

REASON FOR EXTRA PATROL: Premise will be Vacant _____ Other _____

TYPE PREMISE: Business _____ Residential _____ Other: _____

KEYS LEFT WITH ANYONE? Yes _____ No _____ Name: _____

Address: _____ Phone: _____

DO YOU WISH TO BE CONTACTED **COLLECT?** Yes _____ No _____ Phone: _____

C/O Name: _____ Address: _____

OTHER PERSONS ALLOWED ON PREMISES: _____

DATE OF DEPARTURE: _____ DATE OF RETURN: _____

ANIMALS LEFT ON PREMISES: Yes: _____ No: _____ Location: _____

ANY VEHICLE LEFT IN BOAT/YARD? _____ If so, description and location: _____

PROTECTED BY ALARM SYSTEM? Yes _____ No _____ Alarm Company _____

LIGHTS? CONSTANT: Yes _____ No _____ AUTOMATIC: Yes _____ No _____

LOCATION OF LIGHTS _____

***I REQUEST A SECURITY CHECK BE MADE OF MY PREMISES DURING THE DATES
LISTED ABOVE AND WILL NOTIFY YOU UPON MY RETURN***

SIGNATURE: _____ **DATE OF REQUEST** _____

ADDITIONAL COMMENTS :
