

BELGRADE POLICE DEPARTMENT



Thomas B. Quaw Square
91 East Central Ave.
Belgrade, MT 59714

E.J. Clark Jr.
Chief of Police

REQUEST FOR SECURITY

DATE: _____ NAME: _____ PHONE: _____

ADDRESS: _____

DEPARTURE DATE: _____ RETURN DATE: (Mandatory) _____

DESTINATION: _____

RESIDENCE: _____ BUSINESS: _____ SECURITY SYSTEM: RES: _____ BUS: _____

AUTOMATIC LIGHTS: _____ IF YES, LOCATION: _____

HAVE KEYS BEEN LEFT WITH ANYONE? _____ PHONE: _____

IF YES, NAME: _____ ADDRESS: _____

WILL ANYONE HAVE PERMISSION TO ENTER PROPERTY: _____

NAME(S): _____

IN CASE OF EMERGENCY DO YOU WISH TO BE NOTIFIED BY COLLECT CALL

YES: _____ NO: _____ %NAME _____ PHONE: _____

I REQUEST A SECURITY CHECK TO BE MADE ON MY PROPERTY AND AGREE TO NOTIFY THE BELGRADE POLICE DEPARTMENT UPON MY RETURN.

SIGN BY: _____ DATE: _____

OFFICERS'S SECURITY CHECK REPORT CONDITION OF PREMISES OR OTHER

DATE: _____ TIME: _____ OFFICER'S # _____

Dear Resident:

This security check service in no way guarantees that your property will be safe from vandalism or burglary, but merely provides the police department with information of your whereabouts and other pertinent facts if a crime should occur. Have a safe journey and PLEASE CALL US UPON YOUR RETURN.