CLARKS SUMMIT BOROUGH POLICE DEPARTMENT

PROPERTY SECURITY CHECK REPORT

NAME:				ADDRESS:			PHONE	:			
DESCRIPTION	ON/LOCA	TION:									
TYPE PREM	1ISES:	BUSI	NESS	RESIDENCE	OTHE	R					
ALARM SYSTEM: YES NO		NO	TYPE ALARM: IN			INTRUSION	SION FIRE				
ALARM CO	MPANY:_			E.			_ PHONE:_				
LIGHTS ON	: YES	NO		CONSTAN [*]	T: YES N	0		AUTO:	YES	NO	
KEY HOLDE	R NAME:				PHO	NE:					
VEHICLE AT PREMISES: MAKE:				TYPE:			COL	COLOR:			
VEHICLE AT PREMISES: MAKE: MAKE:				TYPE:			COL	COLOR:			
AUTHORIZED ACCESS PERSONS:					PHONE:						
AUTHORIZED ACCESS PERSONS: LAWN SERVICE:				PETS AT HOME: DOGS			CATS_	OT	HER		
EMERGENCY CONTACT NAME:							PHONE	:			
I REQUEST	THAT A S	ECURI	ITY CHECK	BE MADE OF M	Y PROPERTY	Y FRO	M	TO			
AND WILL	NOTIFY U	PON N	MY RETUR	RN.							
DATE OF R	EQUEST:_										
			OFFI	CER'S SECUR	ITY CHEC	K RE	PORT				
DATE	TIME		PREMIS	ES SECURE / AC	ΓΙΟΝ TAKEN			OFFICER'S	GINAT	URE	
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