

**BOROUGH OF PARKESBURG
BUREAU OF POLICE
315 W. FIRST AVENUE, BLDG 2
PARKESBURG, PA 19365**

SECURITY CHECK REPORT

ADDRESS: _____ NAME: _____

REQUEST MADE BY: _____ PHONE: _____

REASON FOR EXTRA PATROL: PREMISES WILL BE VACANT OTHER

TYPE PREMISES: BUSINESS RESIDENCE OTHER _____

PROTECTED BY ALARM SYSTEM: YES NO

LIGHTS ON: YES NO CONSTANT: YES NO AUTOMATIC: YES NO

KEYS LEFT WITH ANYONE: YES NO

IF YES – NAME: _____ ADDRESS: _____

OTHER PERSONS THAT WILL HAVE ACCESS TO PREMISES (*Relatives, Workers, Neighbors, Employees*):

REQUEST THAT A SECURITY CHECK BE MADE OF MY PREMISES FROM: _____ TO _____
AND WILL NOTIFY UPON MY RETURN

SIGNED: _____ DATE OF REQUEST: _____

****THIS SERVICE IS PROVIDED AS A COURTESY ONLY — NO EXPRESSED OR IMPLIED GUARANTEE AS TO THE SECURITY OR SAFE KEEPING OF THE PROPERTY HAS BEEN MADE**

OFFICER'S SECURITY CHECK REPORT

DATE	TIME	PREMISES APPEARED SECURE	OFFICER SIGNATURE