



Police Department

21 North Avondale Plaza
Avondale Estates, Georgia 30002

PH: (404) 294-5410
FX: (404) 299-8137

REQUEST FOR SECURITY CHECK FAX TO: 404-299-8137

Address: _____ Name: _____ Phone #: _____

Departure Date Return Date

Any Animals at the premises? Yes ___ No ___ If yes, describe _____

Cars in driveway or on premises? Yes ___ No ___ If yes, describe _____

Lights on inside premises? Yes ___ No ___ If yes, describe _____

Have keys been left with anyone? Yes ___ No ___ If yes, complete the line below.

Name: _____ Address: _____ Phone #: _____

Will anyone be working at or have access to premises during your absence? Yes ___ No ___

If Yes, Name(s) _____

In case of emergency, do you wish to be notified? Yes ___ No ___ If yes, phone # _____

I request a security check be made of my premises and will notify you if my departure or return date(s) change.

Signed _____ Date of request _____

OFFICER SECURITY CHECK REPORT

Date	Time	Initials/#

Date	Time	Initials/#

Date	Time	Initials/#

Officer Notes: _____

