

Security Check

For Office Use: Complaint No _____ *Date:* _____ *Received By:* _____

Name: _____ Address: _____

Phone: _____ Departure Date: _____ Return Date: _____

Circle One: Home/Business/Other _____

Effective April 01, 2015 the Putnam County Sheriff's Office has changed the policy for security checks. We will only check your house or business for 60 days. After that, the primary contact person will need to refile a security check for an additional 60 days as needed.

Primary Contact Person: _____ Address: _____

Phone: (home) _____ (cell) _____ (other) _____

Are any lights left on? _____ Timer? _____ What Rooms? _____

_____ Times: _____

Any vehicles parked on the premises? _____ Description? _____

Does anyone have access to the premises? _____ Name? _____

Do they have keys to gain entry if needed? _____

Can you be reached in case of an emergency? _____ Phone: _____

Any additional information: _____

I REQUEST A SECURITY CHECK BE MADE ON MY PREMISES AND AGREE TO NOTIFY AUTHORITIES ON RETURN:

SIGNATURE: _____ DATE: _____

I REQUEST AN ADDITIONAL 60 DAYS OF SECURITY CHECKS BE MADE ON THE PREMISES FOR THE HOMEOWNER: SIGNATURE: _____ DATE: _____

For Office Use: Expiration Date: _____ *Date Notice Sent:* _____ *Sent By:* _____