



**Waukeee Police Department  
1300 SE LA Grant Parkway  
Waukeee, Iowa 50263  
515-978-7979**

**Security Check Form**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Reason for Patrol:  Premise will be vacant  Other

Type of Premises:  BUSINESS  RESIDENCE  OTHER \_\_\_\_\_

Protected by alarm system:  YES  NO TYPE OF ALARM \_\_\_\_\_

Lights on:  YES  NO Constant:  YES  NO Automatic:  YES  NO

Keys left with anyone:  YES  NO

If yes, name: \_\_\_\_\_ Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Name, address, and phone number of persons who will have access to premises:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In case of emergency, do you wish to be contacted?  YES  NO

Form of contact: \_\_\_\_\_

I request that a security check be made on my premises from \_\_\_\_\_ to  
\_\_\_\_\_ and will notify upon my return.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_