

LA CENTER POLICE DEPARTMENT

Phone (360) 263-2745 Fax (360) 263-2757

105 West Fifth Street La Center, Washington 98629 E-mail: lcpdrecords@lacenterpd.org

SECURITY REQUEST FORM

NAME:	: HOME PHONE:				
ADDRESS:					
DEPARTURE DATE	: :	RETURN DATE:	Time:		
MISC INFO:				_	
Back yard checked: Y	es No Ligl	hts with Timers: Yes	No		
Vehicles in the drivew	vay: Yes No	type:			
Should anyone be at the	e premises: Yes	No (lawn service	e, neighbor, etc)		
If so, list:					
	IN C	ASE OF EMERGENC	Y:		
Owner can be reached Phone #	at:				
Person to be contacted other than owner: Name: Phone #					
The La Center Police Department will check your home only on the dates given above. Please remember to contact the La Center Police Department on the day you return. If you return after hours or on the weekend, call us the next business day after 8:00 am.					
I hereby request the La Center Police Department to perform security checks of my premises during my absence on the above dates.					
SIGNATURE:			DATE:		
Date	Officer's Secu	rity Report	Officer's Initials and	PSN_	

Page 2 for Security Check at	Return Date		
<u>Date</u>	Officer's Security Report	Officer's Initials and PSN	