# GRAND RIDGE POLICE DEPARTMENT

130 W Main Street
Grand Ridge, IL 61325
(815)249-6462

## REQUEST FOR SECURITY CHECK

REQUESTOR CONTACT INFO:

EMAIL: _____

FIRST NAME: _____

LAST NAME: _____

ADDRESS: _____

PHONE #: _____

REASON FOR SECURITY CHECK:

_____

_____

START DATE: _____

END DATE: _____

ALARM SYSTEM (Circle one): Yes/No

PET ON PREMISE (Circle one): Yes/No

WILL ANYONE BE CHECKING ON THE PROPERTY (Circle one): Yes/No

NAME(S) OF PERSONS CHECKING ON THE PROPERTY:

_____

_____

EMERGENCY CONTACT NAME: _____

EMERGENCY PHONE: _____

EMERGENCY EMAIL: _____

Comments:

Requestors Signature: _____ Date: _____

Please complete and return this form to The Grand Ridge Police Department at: 130 W Main, Grand Ridge, IL 61325 or by email at: grandridgepd989@gmail.com. All request forms must be signed to be valid.