

Address:	Name:			
Type of Premises? Home	Business	Other		
Departure Date:	Return Date:			
Destination:				
Emergency Contact Person and Telephone #:				
Will anyone have keys or access to the premises? Yes No				
If yes, Name(s) Add	lress	_ Phone		
Lights left on? Yes No	Dog in Yard?	YesNo		
Vehicle left in Driveway? Yes No If yes, Description:				

Please return completed form to: City of Heath Department of Public Safety 200 Laurence Drive Heath, TX 75032

Fax: 972-961-4934

Officer's Security Check Report

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Date	Time	Secure Premises?	Officer's Initials

***If premises was unsecured or evidence of forced entry was present, state if you entered and checked premises. If you found evidence of vandalism or theft, make a separate report. Make a note if you tried to contact the emergency contact person or not. ***