

Laconia Police Department
Notice of Residence/Business Security Check

Below please find a list of the dates and times your premises was checked while you were away. We hope you find everything in order, however, if you find a discrepancy, please notify us immediately. Thank you for this opportunity to serve you.

Date	Time	Condition	Off.	Date	Time	Condition	Off.

** If premises were not secured, or evidence of forced entry were present, state whether or not you entered and checked premises. If you found evidence of vandalism or theft, make a separate report.

Call # _____ Departure Date: _____ Return Date: _____

Name: _____ Phone # _____

Physical Address: _____

Mailing Address: _____

Type of Premises: _____ Keys left with anyone? _____

If yes, who? _____ Phone # _____

Local party to be called in case of emergency: _____

Are there alarms in building? _____ Are there cars on property? _____

If yes, describe: _____

Are any lights left on? _____ Are they on a timer? _____

Service people to be contacted: _____

In case of emergency, do you wish to be contacted via collect call? _____

c/o Name: _____ Phone # _____

Address: _____

Additional Information: _____
