



PLATTEVILLE POLICE DEPARTMENT

400 Grand Avenue
Platteville, Colorado 80651
970.785.2215 • 970.785.2476 (f)

BUILDING WATCH REQUEST

Residential & Business Check Form

ADDRESS: _____ NAME: _____

DATE TO START CHECKS: _____ DATE TO STOP CHECKS: _____

REASON FOR CHECKS: VACATION BUSINESS SUSPICIOUS ACTIVITY
 CONSTRUCTION SITE OTHER: _____

TYPE OF PREMISES: RESIDENTIAL COMMERCIAL OTHER: _____

ALARM SYSTEM: YES NO / LIGHTS ON: YES NO AUTOMATIC

DESCRIPTION OF VEHICLE(S) LEFT ON PREMISES: _____

HAVE KEYS BEEN LEFT WITH ANYONE? NO YES: FAMILY FRIEND

KEYHOLDER NAME: _____ PHONE: _____

KEYHOLDER NAME: _____ PHONE: _____

WILL ANYONE HAVE ACCESS TO THE PREMISES WHILE YOU ARE GONE? NO YES:

NAME: _____ PHONE: _____ VEHICLE DESCRIPTION: _____

NAME: _____ PHONE: _____ VEHICLE DESCRIPTION: _____

NAME: _____ PHONE: _____ VEHICLE DESCRIPTION: _____

IN THE EVENT OF AN EMERGENCY, DO YOU WISH TO BE CONTACTED? NO YES:

EMERGENCY CONTACT NAME: _____ PHONE: _____

EMERGENCY CONTACT NAME: _____ PHONE: _____

STATEMENT OF UNDERSTANDING & AGREEMENT

UPON COMPLETING AND SIGNING THIS FORM, I AM REQUESTING THE PLATTEVILLE POLICE DEPARTMENT TO CONDUCT SECURITY CHECKS OF THE ABOVE MENTIONED PREMISES DURING THE DATES INDICATED. I FURTHER UNDERSTAND THAT THIS SECURITY CHECK IS A COURTESY SERVICE PROVIDED BY THE PLATTEVILLE POLICE DEPARTMENT AND DOES NOT GUARANTEE ANY LOSS OF HARM OR DAMAGE TO THE ABOVE MENTIONED PREMISES BEING CHECKED. I FURTHER AGREE TO NOTIFY THE PLATTEVILLE POLICE DEPARTMENT UPON MY RETURN OR IF THE INFORMATION PROVIDED ON THIS FORM CHANGES IN ANY MANNER.

AUTHORIZED SIGNATURE: _____ DATE: _____

DATE	TIME	PREMISES STATUS	OFFICER
		<input type="checkbox"/> SECURE, OR:	
		<input type="checkbox"/> SECURE, OR:	
		<input type="checkbox"/> SECURE, OR:	
		<input type="checkbox"/> SECURE, OR:	

