Olmos Park Police Department
Out of Town Notification

Address ______________________________ Name ______________________________________ Phone _______________________

Departure Date __________________________ Time _________________ Return Date ________________ Time ________________

Premises (Check one) Residence ____________ Business _____________

Have keys been left with anyone? Yes _______ No ___________

If yes, Name ____ Phone _____________________________________

Will someone be working at or have access to premises? Yes ____________ No ____________

If yes, Name _________________________________ Reason/Purpose ___________________________ Vehicle ______________

Name _________________________________ Reason/Purpose ___________________________ Vehicle ______________

Any vehicles left in driveway/carport? Yes _____ No _____ License Plate No(s). ____

Any lights left on in premises? Yes _____ No _____ Timer_____ Location____

Do you have an alarm? Yes _____ No _____ Alarm Company ____

Any animals left on or in premises? Yes _____ No _____ Type(s) ____

Emergency contact by collect call (if desired)

c/o Name ____ Phone ____

Signature ____ Date of Request ____________________________________

******************************_**For use by Olmos Park Police Department below this line**_***********************

Officer's Security Check Report

Date	**ID**	**Time**	**Date**	**ID**	**Time**	**Date**	**ID**	**Time**