

**SANDY POLICE DEPARTMENT
PREMISE CHECK REQUEST**

Vacation Check Special Begin Date: _____ End Date: _____

☛ PLEASE NOTE: THERE IS A 30 DAY LIMIT ON EXTRA PATROL REQUESTS UNLESS APPROVED BY SUPERVISOR

ADDRESS TO PATROL: _____

YOUR NAME: _____ TELEPHONE: _____

YOUR ADDRESS: _____

REASON FOR REQUEST: _____

PERSON WITH KEY: _____ THEIR PHONE: _____

ADDRESS: _____ CITY: _____

PERSON(S) ALLOWED ON PROPERTY: _____

Alarmed Audible Silent Dog Yes Dog No
If yes, location _____

Vehicles on property (description & license plate) _____

Where you can be reached: _____

I request Extra Patrol of my property between the dates listed above. I understand that the Sandy Police Department will check my property periodically, subject to their availability. I also understand that the Sandy Police Department cannot provide continuous checks of my property, and therefore I assign no liability to the Sandy Police Department for any damage or criminal act to my property during the above listed dates.

Signature of Person Making Request

Today's Date: _____

Supervisor Approval: _____ Date: _____ Officer Assigned: _____