

# New Ipswich Police Department

670 Turnpike Road  
New Ipswich, NH 03071

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Chief of Police

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## *REQUEST FOR SECURITY CHECK*

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Anticipated Route of Trip: \_\_\_\_\_

Type of Premises:     Residence     Business     Other \_\_\_\_\_

Have keys been left with anyone?     Yes     No    Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone#: \_\_\_\_\_

Will anyone be working on the premises or have access to it during your absence?     Yes     No

Name(s): \_\_\_\_\_

In case of an emergency, do you wish to be notified by collect call?     Yes     No

C/O Name: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_ Phone#: \_\_\_\_\_

Will you be leaving any lights on?     Yes – On timers     Yes – Constant     No

Location: \_\_\_\_\_

Will any vehicles be left in the yard?     Yes     No    Type(s) and plate number(s) if known: \_\_\_\_\_

Please describe the color and type of building: \_\_\_\_\_

I hereby request a security check be made of my premises and I agree to notify you of my return:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

CFS #: \_\_\_\_\_