



Madison Police Department

P.O. Box 248
1923 Village Road
Madison, New Hampshire 03849



Request for Home Security Check

Name: _____ Telephone #: _____

Physical Address: _____

Departure Date: _____ Return Date: _____

Name/Address/Phone # of Caretaker(s):

1) _____

2) _____

3) _____

Do you expect anyone to be working at/have access to the property? Yes / No
If yes, who? _____

Will there be any lights left on inside the home? Yes / no
If yes, which one(s)? _____

Will there be any vehicles left at the residence? Yes / No
If yes, please list them:
License Plate: _____ Vehicle Description: _____
License Plate: _____ Vehicle Description: _____
License Plate: _____ Vehicle Description: _____

Is the house alarmed? Yes / No
If yes, who is the alarm company? _____

In case of an Emergency, I can be reached at:

By signing below, I request security checks be made of the above-mentioned property. I agree to notify the Madison Police Department of any changes to the information stated above. I understand that reasonable attempts will be made to check my property, as time allows.

Signature: _____ Date: _____

