POLICE VISITATION RECORD

MONTH(S)_____,2_____

Month/Day	Initials	Time	Remarks	Month/Day	Initials	Time	Remarks

LINDEN POLICE DEPARTMENT

UNOCCUPIED DWELLING DAILY COURTESY SECURITY CHECKS

Date_____,2_____

Address_____Name_____

Telephone_____ ☐ Public Establishment ☐ Residence
☐ Regular ☐ Seasonal

Estimated date of departure_____,2____ Estimated date of return_____,2_____

In case of emergency, notify:

☐ Neighbor ☐ Friend ☐ Relative

Name_____

Address_____Telephone_____

Remarks or additional information: _____

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DIRECTIONS: I have personally checked the above listed premises and found same to be Secured before departing, and have initialed and entered the time and Pertinent remarks in the proper column.

This form will remain in each cruiser until the return of the owner and/or proprietor. Visit premises every other day, making these security checks at different times on each occasion.

Upon return of owner and/or proprietor, return this form to the department for filing.