Official Use Only

County Sector

☐ East ☐ West
☐ SE ☐ SW

Daviess County Sheriff's Office

212 St. Ann St.
Owensboro, KY 42303

House Check Forms

Official Use Only

House Check #

Owner's Name: _____ **Home Phone:** _____

Address: _____ **City:** _____ **Zip:** _____

Request Made By: _____ **Relationship to Owner:** _____

Type of Premises:
☐ **Residence** ☐ **Other** _____

Reason For Extra Patrol:
☐ **Premises Vacant** ☐ **Vacation/Out of Town**

Keys Left with Anyone? If yes, please complete the following:

Name

Contact Phone Number: _____

Address: _____ _____ _____ _____

Street City State Zip

Is Residence Protected by Alarm System: ☐ Yes ☐ No If yes, complete following…

Alarm Type:	Alarm Company:	Alarm Co. Phone Number

Will anyone have access to residence while you are away? Name & description of vehicle they drive.

Are there any vehicles left on the premises? Descriptions.

There are any animals? (LIST IF ANY)	**Is there any existing damage to residence?**

Any lights left on? ☐ Yes ☐ No

Constant or Automatic ☐ ☐

Location: _____

Additional Information: _____

I request that a security check be made on my premises starting _____ ending _____
And will notify the Sheriff's Department upon my return for cancellation.

Date of Request:	Signed by:

(Form needs to be received by our office 3 days prior to departure date)

Officer's Security Check Report

Date	Time	Premises Secure (if not state type report filed or action taken)	Unit/Dispatcher