



LAKE TAPAWINGO POLICE DEPARTMENT

PATROL REQUEST

VACATION REQUEST:

LOT NO. _____ NAME: _____

DATE LEAVING: _____ DATE/TIME RETURNING: _____

VEHICLE BEING DRIVEN: _____ LICENSE # _____

VACATION ADDRESS: _____ PHONE: _____

PERSONS THAT WILL BE CHECKING RESIDENCE:

NAME: _____ VEHICLE: _____ PHONE: _____

NAME: _____ VEHICLE: _____ PHONE: _____

PERSON WHO HAS KEY TO RESIDENCE: _____ PHONE: _____

DOES RESIDENCE HAVE ALARM? _____ NAME OF COMPANY: _____

PAPERS STOPPED? _____ MAILED HELD? _____ LIGHTS LEFT ON/TIMES? _____

***** VACATION WATCH REQUESTS ARE GOOD FOR (14) FOURTEEN DAYS*****

POLICE DEPARTMENT EXTRA PATROL REQUEST

OFFICER TAKING REQUEST: _____ DATE: _____

NAME: _____ ADDRESS: _____

PHONE: _____ REASON FOR REQUEST: _____

POSSIBLE SUSPECT OR VEHICLE INFORMATION: _____

***** EXTRA PATROL REQUESTS ARE GOOD FOR (7) SEVEN DAYS, THEN MUST BE RENEWED*****