

**Pipestone County Sheriff's Office
Security Check Request**

Name _____

Address _____ City _____

Phone Number _____ Requested By _____

Type of Premises ___ Residence ___ Business ___ Other-Explain _____

Reason for Security Check _____ Premises will be vacant

_____ Other - Explain _____

Protected by Alarm System? YES NO If yes, type of alarm _____

Lights on? YES NO If yes, constant or automatic? _____

Keys left with anyone? YES NO If yes, with whom? _____

Address _____ Phone Number _____

Other persons who will have access to premises:

Phone number you can be reached at (_____) _____

Date requesting security checks _____ - _____

Signed _____ Date _____

Any other information we should know regarding the premises _____

Please notify the Pipestone County Sheriff's Office upon your return.

