

LAW ENFORCEMENT CENTER

HOME SECURITY CHECK REQUEST FORM

NAME:

(Name of homeowner or renter requesting security check)

ADDRESS:

(Complete physical home address location)

KEYHOLDER:

(Name of trusted local keyholder and contact phone number)

DATE LEAVING:

DATE RETURNING:

(NOTE: If you arrive home early, please call 218-333-9111 and advise you have returned home earlier than scheduled to cancel the security check)

ADDITIONAL INFORMATION: *(Directions to home, color of house, whom may be stopping by, or other info including names, what they will be driving and/or any other pertinent information for officers conducting the security check.)* **THANK YOU!**

FOR LEC OFFICE USE ONLY: *(check appropriate jurisdiction)*

Agency Assigned:

