

REQUEST FOR TEMPORARY SURVEILLANCE

OWNER: _____

ADDRESS: _____ APT # _____

ADDRESS OF PROPERTY TO BE SURVEYED (if different from above): _____

HOME PHONE: _____ BUSINESS PHONE: _____

IN CASE OF AN EMERGENCY, CONTACT:

NAME: _____

ADDRESS: _____ APT # _____

This individual has a key to the property? YES NO. If not:

A KEY CAN BE OBTAINED FROM:

NAME: _____

ADDRESS: _____ APT # _____

CONDITION OF PROPERTY:

Will any lights be left on? If so, are they operated by a timer? _____

Is there an alarm system? If so, is the system automatic or silent, and what company is the system "hooked-up" to? _____

Does the property have a fire escape and/or a skylight? _____

Please note any additional information you feel will be helpful in maintaining surveillance of your property: _____

Property will be vacant from _____ until _____

While "out-of-town" owner may be contacted at: (_____) _____