

CHOCOLAY TOWNSHIP POLICE DEPARTMENT
PROPERTY INSPECTION REQUEST

Name of Requestor: _____

Address: _____ **Telephone:** _____

Is there a telephone number where you can be reached #

Date Leaving: _____ **AM** ___ **PM** ___ **Date Returning** _____ **AM** ___ **PM** ___

Name Of Person(s) Watching Premises:

Telephone:

Does Anyone Have a Key to House? Yes ___ No ___

If So, Name(s) _____

Will There Be Any Lights Left On? Yes ___ No ___ **If So, Where?**

Other Information:

Date: **Time:** **Officer:** **Remarks:**