

**Capron Ridge Homeowners Association
Community Patrol Committee**

Request for Security Check of Property

Requestor: _____
Phone: _____

Owners Name (if not Requestor): _____
Phone: _____

Address of Property: _____

How can the requestor be contacted in an emergency? (eg: cell phone,
hotel phone, other)

Who locally will have a key to the property? (Name, address, phone)

Names of persons authorized to enter the property. (Please advise them to make visits during daylight if possible to avoid creating alarm. They should be prepared to show photo id to the security guard if asked.)

Dates security check is requested. (Requests must be received 3 days prior to the requested start of security watch.)

From: _____ To: _____ or () Until Further Notice. (Note the request will expire after 30 days but may be renewed by email request to the addresses below.)

Return the completed form to the Clubhouse or scan and email to crclubhouse@gmail.com AND blaster1923@hotmail.com

Signature of Requestor

Date

Received