Union County Sheriff's Office

Security Request Form

Name:
DOB: Sex: Race:
Address:
Home Phone: () -
Mobile Phone: () -
Email:
Premise Type: Residential Business Other:
Reason for Extra Patrol: Premise will be vacant Other:
Premise is equipped with Alarm System: YES NO
If Yes, Alarm Company Name:
Interior lights will be left on: Yes On Timer/Automatic
Area of lights:
Animals on Premise YES NO
If Yes, Number of Animals:
Type: Dog Cat Other, Describe:
Vehicles on premise: YES NO
Number of Vehicle left on premise:
Describe:
Are you leaving keys with anyone: YES NO
Relationship:
Name:
Address:
Home Phone:
Mobile Phone:
Other Person with access to premise: YES NO
Relationship:
Name:
Address:
Home Phone:
Mobile Phone:
IN CASE OF EMERGENCY:
Name:
Address:
Home Phone:
Mobile Phone:
Additional information:

I request that Union County Sheriff's Office enter this information into their computer system to assist with extra patrols and emergencies circumstances. I will be LEAVING: Returning:

PLEASE RETURN FORM TO:

Weddington Town Hall 1924 Weddington Road Weddington NC 28104 EMAIL: grant.wrenn@unioncountync.gov