



WOODFIN POLICE DEPARTMENT

90 ELK MOUNTAIN RD ~ ASHEVILLE, NC 28804 ~ (828) 253-4889 ~ FAX (828) 253-4700

Michael Dykes, *CHIEF OF POLICE*

Security Check Request Form

Last Name _____ First _____ Middle _____ Suffix _____

Address _____ City _____ ZIP _____

Home Phone Number (____) _____ - _____ Race _____ Sex _____ Date of Birth _____

Date Leaving _____ Date Returning _____

Emergency Number (____) _____ - _____ Alarm System Y N Lights on Timer Y N

Local Contact Name _____

Local Contact Address _____

City _____ ZIP _____ Contact Number (____) _____ - _____

Alarm Company Name _____

Alarm Company Phone Number (____) _____ - _____ Alarm Permit On File? Y N

Car(s) Present _____ Animal(s) Present _____

House Keeper, Care Taker, or other persons authorized on premises _____

Key Location _____

Special Notes _____

Departmental Use Only

Date Received _____ Date Entered _____

Entered by _____