



County Of Otsego Office Of The Sheriff

"Serving with pride since 1872"

Matthew J. Nowicki

Matthew D. Muladore

Sheriff

Undersheriff

RESIDENCE SECURITY CHECK REQUEST FORM

NAME: _____ PHONE: _____

ADDRESS: _____ TOWNSHIP: _____

PREMISES TO CHECK: RESIDENCE _____ BUSINESS _____ OTHER _____

DESCRIPTION OF PREMISES: _____

DEPARTURE DATE: _____ RETURN DATE: _____

DESTINATION ADDRESS _____

PHONE NUMBER FOR DESTINATION/'S: _____

IS THE PROPERTY ALARMED? _____ NAME OF ALARM CO: _____

NAME/PHONE # FOR KEY HOLDER FOR PREMISES: _____

NAME/PHONE # FOR PERSONS AUTHORIZED TO BE ON YOUR PROPERTY:

ARE ANY LIGHTS ON TIMERS AND THEIR LOCATION: _____

PERSONS TO NOTIFY IN CASE OF EMERGENCY(Name and Address):

SIGNATURE OF PERSON REQUESTING CHECKS: _____

ADDITIONAL REMARKS: _____

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