



South Padre Island Police Department Close Patrol Request

Date of Request _____

House Watch _____ Business Watch _____ Section _____

Beginning Date _____ Ending Date _____

Name of Person Requesting _____

Address _____

If Business State Name _____

Home Phone _____ Work Phone _____

Will there be any lights on? () Yes () No

If so State Location: _____

Is there a Dog? () Yes () No

If so Location: _____

Will there be any vehicles in the area? () Yes () No

If so give description L.P's Make _____ Model _____ L.P's _____

If so give description L.P's Make _____ Model _____ L.P's _____

If so give description L.P's Make _____ Model _____ L.P's _____

Contact Person _____

Address: _____

Phone: _____ Will they have the keys: () Yes () No

Location of Owner _____

Address: _____

Phone Number _____

Officer Making Report _____ Emp# _____

Are there any persons authorized on property () Yes () No, and do they have keys and/or security codes? () Yes () No.

If yes, please list all authorized persons and their purpose for being on premise, on the back of this form.