

ASOTIN POLICE DEPARTMENT

CHIEF RENZELMAN CITY OF ASOTIN





Physical Address	Pho	ne #
Mailing Address	Add	itional Phone #
E-mail Address		
Phone Number you can be	e reached while you are gone:	
·	·	
Date of Departure	Rea	son for Extra Patrol
Departure Time	Vac	ation
Date of Arrival	Pre	mise will be Vacant
Arrival Time	Oth	er
Type of Premises:	Lig	nts Left On Constant?YesNo
Residence		er
Business	Wh	at time is timer set?
Other		
Is the property protected	hy an alarm system? Ves N	o If Yes, Type of Alarm
Name of Alarm Company	Phone Numb	per of Alarm Company
Traine of That in Company	I none ivamo	ci of marin company
Keys left with someone?	Ves No If Ves. Name	
		er
ridai ess	I none i tumo	<u> </u>
Other person(s) allowed a	r will have access to the property	
•	r will have access to the property	Name
Name	Name	Name
NameAddress	Name Address	Address
NameAddress	Name Address	
NameAddressPhone Number	NameAddressPhone number	Address Phone Number
NameAddressPhone NumberPlease contact the Asotin	NameAddressPhone number	Address
NameAddressPhone Number	NameAddressPhone number	Address Phone Number
NameAddressPhone NumberPlease contact the Asotin arrived.	Name	AddressPhone Number val to inform the department you have
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor	NameAddressPhone number City Police Department upon arriv	AddressPhone Number val to inform the department you have
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor	Name	AddressPhone Number val to inform the department you have
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor Signature of City Represe	NameAddressPhone number City Police Department upon arriv	AddressPhone Number val to inform the department you have heck
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor Signature of City Represented Time	Name	AddressPhone Number val to inform the department you have heck
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor Signature of City Represe	NameAddressPhone number City Police Department upon arriv	AddressPhone Number val to inform the department you have heck
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor Signature of City Represented Time	NameAddressPhone number City Police Department upon arriv	AddressPhone Number val to inform the department you have heck
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor Signature of City Represented Time	NameAddressPhone number City Police Department upon arriv	AddressPhone Number val to inform the department you have heck
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor Signature of City Represented Time	NameAddressPhone number City Police Department upon arriv	AddressPhone Number val to inform the department you have heck
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor Signature of City Represented Time	NameAddressPhone number City Police Department upon arriv	AddressPhone Number val to inform the department you have heck
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor Signature of City Represented Time	NameAddressPhone number City Police Department upon arriv	AddressPhone Number val to inform the department you have heck
NameAddressPhone Number Please contact the Asotin arrived. Signature of Requestor Signature of City Represented Time	NameAddressPhone number City Police Department upon arriv	AddressPhone Number val to inform the department you have heck

<u>www.cityofasotin.org</u> PO Box 517 121 Cleveland Street Asotin, WA 99402 Phone: 509-243-4411 Fax: 509-243-1223 Email: Asotin300@gmail.com