



## GRANVILLE POLICE DEPARTMENT PROPERTY PROTECTION INFORMATION

Line Number (Dept. Use Only):		Leave Date:	
Name:		Return Date:	
Address:		Phone:	
Walk Around		Lights On	
Alarm System		Vehicle(s) Remaining on Property	
Lights Location:		Alarm System Type:	
Vehicle #1 Make:	Model:	Year:	Color:
Location:			
Vehicle #2 Make:	Model:	Year:	Color:
Location:			

Emergency Keyholder #1 Name:	Emergency Keyholder #2 Name:
Address:	Address:
Phone:	Phone:

Additional Information:
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