Holden Beach Police Department
Keep Check Request Form

Property Owner Name: _____

Address: _____

Phone Number _____ Alt Phone Number _____

Begin Date _____ Begin Time _____

End Date _____ End Time _____

List All parties allowed on property while you are away. _____

_____

Lights On: N Y Where? _____

Vehicles at location: N Y Color,Type,Location, _____

_____

Contact/Keyholder Name: _____

Phone Number _____ Alt Phone Number _____

Permission to Arrest? N Y

Authorization to act as Agent on File? N Y

Special Instructions: _____

_____

_____

Officer Name/Signature: _____/_____

Property Owner Signature _____

Date: _____