**Town of Magnolia Springs**

**Courtesy Residential Security Check Application**

The Town of Magnolia Springs, in cooperation with the Baldwin County Sheriff’s Office, provides a Courtesy Residential Check while citizens go on vacation. If you are interested in utilizing this service please follow the instructions below.

- Complete the attached form in its entirety.
- Submit your application 3-5 days prior to your vacation. **Advance notice is required** for processing and scheduling.
- Let us know if your neighbors are aware that you are away.
- Try not to leave any vehicles in your drive way or on your street during your absence (to avoid possible theft or vandalism).
- To avoid possible theft of mail, newspapers and/or packages, please stop those services or make the necessary arrangements to have them collected.
- As a crime prevention tip, we encourage you to not leave any lights on in your front porch unless they are on a timer. We encourage you to use timers on interior lights as well.
- **Please call us immediately upon your return @ 251-965-9888, especially if you return prior to the date listed on the application.** Shortly after, we will mail you a recap of the services rendered.

Neither the Town of Magnolia Springs nor the Baldwin County Sheriff’s Office will be held responsible in the event there is criminal activity committed on your property while you are away. The Courtesy Residential Check is a service provided by the deputy assigned to the Town of Magnolia Springs and will occur only when the deputy is on duty. No courtesy checks will be provided by the Baldwin County Sheriff’s Office in the absence of the Magnolia Springs Deputy. The Courtesy Residential Check will occur at various times of the day and night throughout your absence. It is strongly encouraged you provide any and all information deemed necessary to assist the deputy in performing courtesy checks. If any criminal activity has occurred during your absence, contact the Town of Magnolia Springs Deputy immediately.
RESIDENTIAL SECURITY CHECK APPLICATION

DATE: ____________________________

NAME: __________________________________________ PHONE ____________________________________

ADDRESS ________________________________________________________________

CROSS STREET ____________________________________________________________

LEAVING
Date ______________ Time __________ RETURNING
Date ______________ Time __________

******IMPORTANT: Please call us immediately upon your return at 251-965-9888******

EMERGENCY CONTACT INFORMATION

Name- __________________ Address __________________ Phone __________

EMERGENCY CONTACT INFORMATION

Name- __________________ Address __________________ Phone __________

Will lights be left on? Yes ______ No ______ If yes, location ________________________________

Will pets be at home? Yes ______ No ______ If yes, details ________________________________

Newspaper Stopped? Yes ______ No ______ Mail Stopped? Yes ______ No ______

Lawn Service? Yes ______ No ______ If yes, which day(s) ________________________________

Will doors & windows be secure? Yes ______ No ______ If no, What is not secured? ________________________________

What would you like checked? Front only? ________ Front & Backyard? ________________________________

List the names & vehicles of any person(s) allowed at the residence during your absence?
1. __________________ 2. __________________

Name of person completing form __________________________________________ Accepted by: ________________________________

**Use the back of the application for any additional information**

APPLICATION FILED (check one) Via the telephone _______ In person ________

(for office use only)
Follow up letter- Date ______ Response ______ Yes ______ No . If yes, explain ________________________________