



Saratoga Springs Police Department
Home Inspection Checks / Extra Patrol Checks

Name: _____

Phone #: _____

Address: _____

Other Contact #: _____

Home Inspection

The individual listed above requests extra patrol be conducted on the listed address from
_____ to _____.
Date Date

Extra Patrol

The individual listed above requests extra patrol be conducted on the listed address/area.

Narrative: _____

Please return completed form in person or by mail to:

Saratoga Springs Police Department
1307 N. Commerce Dr., Suite 120
Saratoga Springs, Utah 84045