

South Harrison Police Department

NICHOLAS P. PRIORE • CHIEF OF POLICE

664 Harrisonville Road, Mullica Hill, NJ 08062

Phone: (856) 769-3737 ext 111 • Fax: (856) 769-4060

npriore@southharrison-nj.org



SECURITY CHECK WAIVER

The acknowledger, being a duly authorized person to request a Police Security Check, understands that the purpose of the Police Security Check is to identify residences that are vacant and to increase police surveillance and security during the period of vacancy. Residences, which are vacant, will be checked by the police as time permits.

It is understood that the Township of South Harrison does not assume responsibility for the home and that the Police will not provide twenty-four hour protection. It is also understood that the Township of South Harrison and the Police Department make no representations of warranties as to the results of the Police Security Check.

Security Checks of a residence are not routinely approved for time periods in excess of 21 days. Pre-approval from the South Harrison Township Police will be required for any request for a security check longer than 21 days. Please contact the Chief of Police, Nicholas P. Priore at (856) 769-2879 prior to submitting any request for a security check in excess of 21 days.

House check forms will only be accepted from township residents and are not intended to be used by realtors or banks to secure vacant/foreclosed houses.

The acknowledger authorizes the Police to enter the residence if any of the following conditions exist:

- A. There is an unlocked/broken door/window or other mode of entry is found or reported.
- B. A burglar alarm or fire alarm has been activated at the residence.
- C. The Police Officer(s) has/have reasonable cause to believe that there has been an unlawful entry.
- D. Utility damage that may require shutting off water, gas, or electricity in order to prevent further damage to property or to prevent continuation of an unsafe condition.
- E. Any other condition found by the Police Officer(s), which give reasonable cause to believe that there is an unsafe condition.

I have read the information contained in the request for a Police Security Check and understand its terms. I also agree to hold the Township of South Harrison, South Harrison Police, and any other agents, employees or designated persons, harmless for any damage resulting from an entry to the residence being made pursuant to this waiver and consent.

By signing the Request for Security Check Form, you are agreeing to the above conditions.

**Please contact our dispatch center at (856) 589-0911
if you return home early or need to extend your return date.**



South Harrison Township Police REQUEST FOR HOUSE/SECURITY CHECK

Departure Date: _____ Return Date: _____

Address: _____

Owner/Occupant Name: _____

Owner/Occupant Telephone: _____ Cell: _____

Do you have an alarm? Yes No Alarm Company Phone Number: _____

Are you leaving lights on? Yes No If so, where? _____

Do you have any motion detector lights? Yes No If so, where? _____

Will there be any cars on the premises? Yes No If yes, please describe.

_____	_____	_____	_____
Make	Model	Color	License Plate #

_____	_____	_____	_____
Make	Model	Color	License Plate #

Does anyone have permission to work or be on the premises? If so, list names.

Emergency Contact Name: _____

Address: _____

Telephone: _____ Cell: _____

Is there anything else we need to know? If so, please explain.

I have read and agree to the conditions outlined in the Security Check Waiver.

Signature

Date