



Astatula Police Department

25009 County Road 561 – Post Office Box 172
Astatula, FL 34705
Phone (352) 742 – 2422 · Fax (352) 343 - 8721

Name _____ Address _____

Request made by _____ Phone No. _____

Reason for Extra Patrol _____

Type of Premises: Business Residence Other _____

Protected by alarm system: Yes No If Yes what type _____

Lights On: Yes No Constant: Yes No If Yes what type _____

Keys left with anyone: Yes No

Name _____ Phone No. _____

Address _____

Other persons that will have access to premises

In case of an emergency, do you wish to be notified by a call?

Yes No

Name _____ Phone No. _____

Address _____

Request made from _____ to _____

I, _____ state that I am the district manager or the equivalent or have the power to act as an agent for, namely _____ an owner of private or business property. I state that I authorize any and all officers of the Astatula Police Department to act as an agent of stated above business or private owner. In signing this, I fully understand that I am giving my consent to the Astatula Police Department to act as follows: to order any and all persons in violation of loitering and/or trespassing, to leave the premises and anyone defying the order is subject to arrest for trespass after warning. I also understand that I am signing an intent to prosecute any and all violators.

Signed _____ Date _____

CALENDAR

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1	1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9	9
10	10	10	10	10	10	10	10	10	10	10	10
11	11	11	11	11	11	11	11	11	11	11	11
12	12	12	12	12	12	12	12	12	12	12	12
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18	18	18	18	18	18	18	18	18	18	18	18
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25	25	25	25	25	25	25	25	25	25	25	25
26	26	26	26	26	26	26	26	26	26	26	26
27	27	27	27	27	27	27	27	27	27	27	27
28	28	28	28	28	28	28	28	28	28	28	28
29	29	29	29	29	29	29	29	29	29	29	29
30		30	30	30	30	30	30	30	30	30	30
31		31		31		31	31		31		31