



Brunswick Police Department

REQUEST FOR SECURITY SURVEY BUSINESS

BUSINESS NAME:					
BUSINESS ADDRESS:					
TELEPHONE NUMBER:					
NAME OF OWNER OR PERSON REQUESTING SURVEY:			TITLE:		
HOME TELEPHONE NUMBER:					
CELL NUMBER:					
OTHER LOCAL CONTACT PERSON IF AVAILABLE:					
TELEPHONE:					
BUSINESS HOURS:	Open	Close		Open	Close
SUNDAY			THURSDAY		
MONDAY			FRIDAY		
TUESDAY			SATURDAY		
WEDNESDAY					
CURRENTLY HAVE ALARM SYSTEM?	YES	NO	(Please circle one.)		
IF YES, NAME/PHONE OF COMPANY					
NUMBER OF PERMANENT EMPLOYEES:					
ANY SPECIAL SECURITY CONCERNS:					

Please complete and return this form to:
 Brunswick Police Department, Attn: Public Affairs, 206 Mansfield St., Brunswick, GA 31520,
 or fax to (912)267-5526 in order to have a Security Survey performed on your business.