



VILLAGE OF MASTIC BEACH
369 Neighborhood Road
Mastic Beach, NY 11951
631.281.2326
www.masticbeachvillageny.gov

RESIDENCE CHECKS



Date: _____

The undersigned hereby requests additional safety patrols by Mastic Beach Village Public Safety at the below listed location for the time periods indicated.

Name: (please print) _____

Location: _____

Date: _____

From

To

Reason for Request: _____

Note: As a service to the residents of the Village of Mastic Beach, Public Safety will provide additional patrols at above location and report any unusual observances/occurrences to the Suffolk County Police Department.

Check the following preventative measures taken while away to assist Officers on patrol:

- Mail/Newspapers cancelled.
- Interior light timers. If so, times set on/off _____.
- License plates of vehicles authorized to be on property: _____
- Neighbor/Friend/Relative to contact if necessary. _____

Signature (owner/resident): _____

Received by: _____