



**SARATOGA  
SPRINGS**  
*Life's just better here*

**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:**

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**Please return completed form in person or by mail to:**

Saratoga Springs Police Department  
367 S Saratoga Road  
Saratoga Springs UT 84045