



## VULNERABLE ADULT CHECK REQUEST

Name: \_\_\_\_\_  
(Last) (First) (MI)

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

House Description: \_\_\_\_\_

Keys left with anyone? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Who to notify in case of emergency: \_\_\_\_\_

Phone: \_\_\_\_\_

Special Instructions/Comments:

**I request that the Belle Plaine Police Department complete checks on the above named individual, as described above.**

(Signature) \_\_\_\_\_ (Date) \_\_\_\_\_

Relationship to Listed Individual: \_\_\_\_\_