



Department of Police



ROBERTO M. ROSADO
Chief of Police

50 WEST MAIN STREET
MERIDEN, CONNECTICUT 06451

EXTRA CHECKS REQUEST FORM

POST# _____ (Police Use Only)

DATE: _____

ADDRESS: _____

Business Name (if a business): _____

REASON FOR EXTRA CHECKS (CHECK ALL THAT APPLY)

- _____ CRIMINAL MISCHIEF
- _____ THEFTS
- _____ TRESPASSING
- _____ OTHER

PLEASE GIVE A BRIEF EXPLANATION BELOW:

CONTACT PERSON: _____

ADDRESS: _____

PHONE NUMBER(S): _____

ADDITIONAL CONTACT PERSON: _____

ADDRESS: _____

PHONE NUMBER(S): _____

*****CHECKS WILL REMAIN ACTIVE FOR 14 BUSINESS DAYS*****