

Landlord/Attorney Contact Info:

Name: _____

Phone: _____

Physical Description of the Premises:

Apt# if applicable: _____

How can the building be entered? _____

Physical description of tenant: _____

Phone number for tenant: _____

Possible dangers: _____

History of Violence? _____

History of Criminal Behavior? _____

History of Mental Health Issues? _____

History of Domestic Disputes? _____

Any known weapons in the building? _____

Any children in the home? _____ Approx ages: _____

Any pets in the home? _____ Are they aggressive? _____

Known drug or alcohol involvement? _____

Time tenant is most likely to be home? _____

Is tenant likely to avoid service? _____

Is tenant employed? _____ If so, where? _____

Any additional tenants? _____

Any vehicles at the premises? _____

Are the appliances owned by landlord or tenant? _____

Additional information: _____