



Business Security Survey

BUSINESS NAME _____

ADDRESS _____ PHONE _____

MANAGERS NAME _____

BUSINESS PHONE _____ CELL PHONE _____

OFFICER _____ DATE _____

EMERGENCY CALL LIST:

Name	Position	Address	Phone
1 st _____			
2 nd _____			
3 rd _____			
4 th _____			

Structural Design _____

Potential Areas of Vulnerability & Recommendations

	Problems	Recommendations	Alarm Y N
I. EXTERIOR			
A. North Side			
1. Doors	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
2. Windows	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
3. Lights	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
4. Vents	_____	_____	_____

	Problems	Recommendations	Alarm Y N
B. East Side			
1. Doors	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
2. Windows	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
3. Light s	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
4. Vents	_____	_____	_____
C. South Side			
1. Doors	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
2. Windows	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
3. Light s	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
4. Vents	_____	_____	_____
E. West Side			
1. Doors	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
2. Windows	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
3. Light s	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
4. Vents	_____	_____	_____

II. INTERIOR

			Comments	
A. Safes				
1.	Bolted	Y	N	_____
2.	Visible	Y	N	_____
3.	Lighted	Y	N	_____
4.	Decals	Y	N	_____
5.	Locks Operable	Y	N	_____
6.	Locks Utilized	Y	N	_____
7.	Comb. Control	Y	N	_____
B. Cash				
1.	Excessive Safe			_____
2.	Excessive Register			_____
3.	Excessive Other Location			_____
C. Deposits				
1.	Armed Car			_____
2.	Employee			_____
3.	Other			_____
D. Alarm				
1.	Type of Perimeter Alarm			_____
2.	Type of Robbery Alarm			_____
3.	Type of Fare Alarm			_____
4.	Type of Motion Alarm			_____
5.	Other Alarms			_____
6.	Alarm Maintenance Policy			_____
7.	Alarm Company and Address			_____
E. General Security				
1.	Number of Employees with Keys			_____
2.	Number of Ex-employees with Keys			_____
3.	Number of Employees with safe comb			_____
4.	Date Safe Comb last changed			_____
5.	Date Lock Cylinder Last Changed			_____
6.	Number of Employees present at Opening and Closing			_____
F. Training				
1.	Shoplifting	Y	N	_____
2.	Robbery	Y	N	_____
3.	Short Change	Y	N	_____
4.	Flim Flam	Y	N	_____
5.	Checks	Y	N	_____
6.	Refunds	Y	N	_____

7. Counterfeit money Y N _____

G. Stock Room Area

- 1. Open Boxes _____
- 2. Exits _____
- 3. Inventory Control _____
- 4. Trash Removal _____
- 5. Alarmed _____
- 6. Customer Access _____
- 7. Employee Access _____
- 8. Employee Lounge in Stock Room _____
- 9. Employee Coat Rack in Stock Room _____
- 10. Other _____

H. Employee Relations

- 1. Manager and Employee _____
- 2. Employee to Employee _____
- 3. Customer Employee _____

NOTES: _____

For additional crime prevention tips, please visit www.edentonpd.com and click on *crime prevention*.