



P.a.C.T.

Police and Communities Together

1. In an effort to curtail underage drinking among adolescent youth, enforcement agencies will conduct random patrol checks of property if requested by a parent or guardian. This service is offered to any parent or guardian who will be away from their residence for an extended period of time. An extended period of time is defined as being out of town overnight or longer.
2. A parent or guardian must specifically request the service. An application form is available at the participating agencies above or online at <http://www.asapcoalition.com/resources/pact.html>. The form requires the following:
 - The date for which the service is requested.
 - Street address and description of the residence to be checked.
 - Cellular phone or pager number of the parent/guardian requesting the service.
 - The name of the person(s) who are authorized to be at the residence and their ages.
 - Description, including plate numbers of any vehicles authorized to be at the residence.
 - Preferably, two names and telephone numbers of a responsible adult who is authorized by the parent to respond to and enter the residence in the event of a problem. These people should each have a key to the residence.
 - Authorization by the parent for law enforcement to investigate activity at the residence whenever reasonable cause exists to believe underage drinking is occurring.
 - Any additional information the police need to be aware of.
 - Signature of the person requesting the service.
3. Should law enforcement investigate or respond to a complaint of underage drinking at the residence, a reasonable attempt will be made to contact the parent or guardian.
4. Decisions relating to the prosecution of any criminal or juvenile offenses will be left to the discretion of the enforcement agency.
5. The parent or guardian reserves the right to cancel the request at any time.

Request Form

Name: _____

Street Address: _____

Contact Numbers:

1. _____ (Home)

2. _____ (Cellular)

3. _____ (Pager)

Physical Description of Residence: _____

Names and Age(s) of Person(s) at Residence:

Vehicles at Residence (Include plate numbers):

1. Plate Number _____ Make _____ Year _____

2. Plate Number _____ Make _____ Year _____

3. Plate Number _____ Make _____ Year _____

Date(s) requested: _____

Authorized Contact Person:

1. _____ Phone: _____ Key?: _____

2. _____ Phone: _____ Key?: _____

Police Authorized to Check Residence for Underage Drinking: Yes__ No__

Additional Information: _____

Signature: _____ Date: _____

