



San Juan County
Communications Authority

House Watch/Officer Safety Entry Request

PSI-2015-__

Date: _____ Time: _____

Requesting Agency: _____

Requesting Officer: _____

Supervisor Approval: _____

- Hazard at a location (Enter in House Watch File)
- Informational (Enter in House Watch File)
- Dangerous Person (Enter in Officer Safety File)

Incident #: _____

House Watch File

Address: _____

Narrative: _____

Officer Safety File:

Name: _____ DOB: _____

Narrative: _____

Entered By:

_____ Name _____ Date _____

Reviewed By:

_____ Name _____ Date _____



FAX to SJCCA:
(505) 334-2880

Email to SJCCA:
sjcounty911@sjcounty.net