WELFARE CHECK

Town of Aberdeen
804 N. Sandhills Blvd., Aberdeen, NC 28315
Phone: 910-944-9721 Fax: 910-944-1545

RESIDENT WELFARE CHECK REQUEST FORM

Resident Information:

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Have keys been left with anyone / hidden outside? __Yes __No Where: _____
Name: _____ Address: _____ Phone: _____

Resident's Emergency Contact Person:

Name: _____

Relationship to Resident: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Resident Signature: _____ **Date:** _____

----------FOR DEPARTMENT USE ONLY----------

Date	Time	State if contact with resident was made	Officer's Initials