

**MARYLAND COMMUNITY CRIME
PREVENTION INSTITUTE
HOME SECURITY SURVEY**

FILE (CASE) NO. _____

RESIDENT'S NAME _____ PHONE NO. _____

ADDRESS _____ COUNTY _____

SURVEYING OFFICER _____ Single Family Multiple Unit Home Apartment

Department or Agency _____ Date _____

Recommendations for security improvements checked below are in the interest of reducing the opportunity for a crime to occur.

DOOR SYSTEMS

1. HINGED DOORS – F-front S-side R-rear O-other*

- | | F | S | R | O | Recommendations |
|----|--------------------------|--------------------------|--------------------------|--------------------------|---|
| a. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Satisfactory |
| b. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Reinforce frame & strike plate |
| c. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Add auxiliary lock |
| d. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Single cylinder |
| e. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Double cylinder** |
| f. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Pin hinges |
| g. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Install 190 door viewer |
| h. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Replace door |
| i. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Security glazing |
| j. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Double door – Install lever extension flush bolts |

Other (specify) _____

* Doors leading to living area from basement or garage, hinged doors from garage to outside.

** Before recommending or using double cylinder dead-bolts, check local building code and fire regulations.

2. SLIDING DOORS

- Recommendations**
- a. Satisfactory
 - b. Take up slack (spacer in upper track)
 - c. Use charlie bar or similar device
 - d. Pin doors
 - e. Auxiliary locks
 - f. Reverse units (if incorrectly installed)

Other (specify) _____

3. GARAGE DOORS

- Recommendations**
- a. Satisfactory
 - b. Add auxiliary lock–type
 - c. Pin track
 - d. Electronic door opener

Other (specify) _____

WINDOW

4. DOUBLE HUNG

Recommendations

- a. Satisfactory
- b. Pin windows
- c. Install auxiliary lock
- d. Secure air conditioning unit from inside

5. CASEMENT

Recommendations

- a. Satisfactory
- b. Replace latching mechanism
- c. Adjust latching mechanism
- d. Remove crank

6. SLIDING

Recommendations

- a. Satisfactory
- b. Pin windows
- c. Install auxiliary lock
- d. Use Charlie bar or similar dev.
- e. Spacer in upper track

7. BASEMENT

Recommendations

- a. Satisfactory
 - b. Decorative grill
 - c. Interior or exterior security bar
- Other (specify) _____

MISCELLANEOUS

8. Attic, basement, outbuildings, fences

Recommendations _____

9. ALARMS

LIGHTING

10. Recommendations

- a. Satisfactory
- b. Exterior-additional lighting
- c. Interior-use timer

SHRUBBERY

11. Recommendations

- a. Satisfactory
- b. Trim from windows
- c. Trim from doors

SECURITY HABITS

- 12.**
- Reviewed basic security habits with resident (see reverse)

OPERATION ID

- 13. Recommendations**
- a. Satisfactory
 - b. Engrave property
 - c. Display warning stickers
 - d. Update

OTHER INFORMATION/Explanation of above _____

Signature of resident _____
 Signature of officer _____

**AGENCY (DEPARTMENT) FILE COPY
NOTE: THIS INFORMATION IS CONFIDENTIAL AND
SHOULD BE FILED IN A HIGH SECURITY AREA.**

(NOTE: Separate copies before completing this side)

BASIC SECURITY HABITS

YES NO

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Does resident always lock home and garage? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is there proper control over keys and/or have locks been rekeyed if necessary? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does resident utilize security lighting (e.g. nightlighting, use of timers)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are proper precautions taken before opening the door or admitting strangers? (e.g. use of peepholes, proper identification)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are house numbers plainly visible? |



VACATION PRACTICES

YES NO

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Does resident inform neighbors when he (she) is going to be away for extended periods of time? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does resident have someone to pick up mail, newspapers, etc. or stop deliveries? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does resident utilize security lighting (e.g. nightlighting, use of timers)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does resident have someone mow lawn, shovel snow, etc. to give home a lived-in appearance? |

Other _____

Maryland Crime Watch is a program of the
Maryland Community Crime Prevention Institute
Police Training Commission
Department of Public Safety and Correctional Services
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Woodstock, MD 21163-1099