

**Southern Pines Police Department
Communications Division
Vehicle Parking Information Form**

Location

SP Train Station Public Parking Lot Other: _____

Vehicle

License Plate #: _____ State: _____ Year: _____

Color: _____ Make: _____ Model: _____

Date Leaving: _____ Date Returning: _____
(Advise caller to notify SPPD upon return)

Requestor

Name

Last Name: _____ First: _____ Phone #: _____

Address

Street: _____ City: _____ State: _____ Zip: _____

Is the Requestor the Registered Owner? Yes No

Emergency Contact

Last Name: _____ First: _____ Phone #: _____

Comments

For Department Use Only

Notification Date: _____ Time: _____

Entered into CAD: Yes No

Comments

Telecommunicator: _____
Signature