

South Burlington Police Department
Project Good Morning
Application Form



If you are interested in participating in Project Good Morning, please fill out this application and return it to:

**South Burlington Police Department
Attn: Project Good Morning
19 Gregory Drive
South Burlington, VT 05403**

You may also drop it off in person at the South Burlington Police Department

Please print or type all information

Name: _____

Address: _____

Telephone number: _____

Date of birth: _____

Description of residence: _____

Person to notify in case of emergency: _____

Their address: _____

Telephone number: _____

Relationship: _____

Does anyone local have a key to your home? YES / NO

If yes, name: _____

Their address: _____

Telephone number: _____

Relationship: _____

Do you have any disabilities: YES / NO

If yes, please explain: _____

Who is your primary care doctor: _____

Telephone number: _____

Address: _____

Do you drive? YES / NO Do you have vehicle? YES / NO

If yes, vehicle make: _____ Vehicle model: _____

Vehicle year: _____ License plate number: _____

Where is your vehicle typically parked: _____

South Burlington Police Department
Project Good Morning
Agreement

I, the undersigned, agree to the rules of participation in Project Good Morning as set forth below.

I understand that the purpose of the program is to provide me with a sense of security and independence.

I understand that if I do not call by 10:00 a.m., the South Burlington Police dispatcher will:

1. Call my residence.
2. If no answer is received, they will dispatch a police officer to my residence to check on my wellbeing,

I understand that if I do not answer the door for the officer, and the officer reasonably believes that I may be inside and in need of assistance, the officer will:

1. Use my key to enter the residence.
2. If no key was provided, the officer may force entry into my residence.

I understand that the South Burlington Police Department accepts no responsibility for damages caused in entering my residence under the above stated conditions and agree to all of the terms and conditions set forth in the application.

The South Burlington Police Department reserves the right to discontinue this service at any time.

Signature: _____ Date: _____

Printed name: _____

Key provided to the South Burlington Police Department: **YES / NO**

To be completed by the South Burlington Police Department

Application Approved: **YES / NO** Lockbox installed: **YES / NO**

Location of lockbox installation: _____

Signature: _____ Date: _____

(Approving dispatcher)