



**STANHOPE BOROUGH**  
**POLICE DEPARTMENT**  
77 MAIN STREET  
STANHOPE, NEW JERSEY 07874  
973-347-4533

**Good Morning (Senior Citizen Check-In) Program**

**Personal information:**

Name: \_\_\_\_\_ Start Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number (Home): \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Pets: \_\_\_\_\_ Friendly? (Yes/No): \_\_\_\_\_

Handicaps/Illnesses: \_\_\_\_\_

Garage/House Codes: (Yes/No): If yes, please indicate: \_\_\_\_\_

Hidden Keys (Yes/No) If yes, where?: \_\_\_\_\_

**Vehicle Description:**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ License Plate: \_\_\_\_\_

**Emergency Contact #1 (Key Holder):**

Name: \_\_\_\_\_

Phone Number (Home): \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Emergency Contact #2 (Key Holder):**

Name: \_\_\_\_\_

Phone Number (Home): \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

Any other pertinent information: \_\_\_\_\_

\_\_\_\_\_