

Burlington County Sheriff's Department

Senior Services Unit

Free Home Security Inspection

- ⇒ *Free Home Security Inspection*
- ⇒ *Free Emergency Battery Light/Flashlights*
- ⇒ *Free Installation of Locks*
- ⇒ *Free Installation of Door Viewers*
- ⇒ *Smoke Detectors*



Crime Prevention Specialists are available to give Home Security Workshops and Presentations to clubs, churches, various civic and community groups. Sheriff Stanfield will also provide security handouts and booklets to any Burlington County Resident upon request.

Program Goal

To provide increased security for senior citizen's homes located in the County of Burlington.

Eligibility Requirements:

All applicants must be a resident of **BURLINGTON COUNTY** and be at least age sixty (60) to be eligible for this **FREE** program.

“Working for a safer community”



For More Information Contact The :
Burlington County Sheriff's Department
Senior Services Unit
49 Rancocas Road
Mount Holly, NJ 08060



Sheriff
Jean E. Stanfield
Undersheriff
Bryan H. Norcross

609-265-5796



Office of the Sheriff
 County of Burlington
JEAN E. STANFIELD, SHERIFF



**SENIOR CITIZEN HOME SECURITY PROGRAM
ASSISTANCE APPLICATION**

DATE: ___/___/___

PLEASE PRINT IN INK

NAME: FIRST MIDDLE LAST _____ / / DATE OF BIRTH

ADDRESS: NUMBER STREET CITY/TOWN DEVELOPMENT ZIPCODE

() HOME PHONE _____ E-MAIL ADDRESS _____ () ADDITIONAL CONTACT NO.

DO YOU OWN YOUR PROPERTY? () YES () NO
IF NO YOU MUST ATTACH LETTER OF APPROVAL FROM PROPERTY OWNER
DO YOU CURRENTLY HAVE DEADBOLT LOCKS ON YOUR DOORS?
() YES () NO () UNSURE

TRUTH OF DWELLING OCCUPANCY STATEMENT

In addition to applicant the following number of occupants reside at the above home or apartment on a full time basis.

Applicant = 1 + Other occupants = _____ Total = _____

**THE FOLLOWING INFORMATION IS USED FOR STATISTICS ONLY.
 INFORMATION DOES NOT DETERMINE QUALIFICATION FOR THIS PROGRAM.**

TOTAL GROSS FAMILY INCOME ON LAST TAX RETURN.....\$ _____
 The Gross Family Income must be shown to participate in this program.

All applicants will receive equal consideration on a first return, first served basis regardless of race, religion, creed, color, national origin, martial status, disability, sex, affectional or sexual orientation.

CERTIFICATION

I hereby certify that all the above information is true, complete and made in good faith. I am aware that any misrepresentation or false statements will result in ineligibility of my assistance application and the immediate reimbursement of any amount of financial aid received from this program.

_____ / / DATE
 APPLICANT'S SIGNATURE

NOTES (i.e. need smoke detectors, etc.): _____

Return completed application to: Senior Services Unit
 Burlington County Sheriff's Department
 P.O. Box 6000
 49 Rancocas Road
 Mount Holly, NJ 08060-6000

(609) 265-5796

CODE

 OFFICE USE ONLY