

EMMAUS POLICE DEPARTMENT
400 JUBILEE STREET
EMMAUS, PA. 18049
610-967-3113

CHEC  MATE

“CITIZENS HELPING ELIMINATE CRIME”

DATE OF APPLICATION: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

DATE OF BIRTH: _____

EMPLOYER: _____

***Have you ever been convicted of a crime other than a traffic offense?**

YES _____ NO _____

Do you wish to join a Crime Watch group?

YES _____ NO _____

Please fill-out and mail to:

Crime Prevention Unit
Emmaus Police Department
400 Jubilee Street
Emmaus, Pa. 18049

(all information contained herein will remain strictly confidential)

OFFICIAL USE ONLY

APPROVED BY _____

Chief of Police

CHEC-MATE # ISSUED _____