

**Business Crime Prevention (Commercial Security) Survey Report**

**PREPARED FOR:**

**Business Name:**

**Type of Business:**

**Address:**

**City, State, ZIP:**

**Telephone Number:**

**Owner:**

**Manager Name:**

**Prepared by:**

**Section One**

**A. Introduction**

**Executive Summary:**

*(Overview of why this report is important and describe your methodology)*

**Company Overview:**

*(Who, What, Where How, Company History and Background)*

**Section Two**

**Site Overview**

**A.** **Identification of Site:**

(Describe the site, and its borders giving the address and nearest cross streets)

**B. External Environment:**

(Describe the area around the business, nearest city center, neighborhoods, etc)

**C. Traffic:**

(Traffic patterns and flow)

**D. Law Enforcement:**

(What agencies service the area)

**E. Office Operating Hours**:

(List office and or store hours)

**D.** **Area Crime Status:**

(Describe the area crime stats in as much detail as possible.)

**F. Dimensions of Property and Buildings:**

(Found on tax appraisals websites)

**Property:**

**Property ID:**

**Total of All Building SF:**

**Building Type:**

**Section Three**

**Exterior Physical Characteristics**

1. **Perimeter Grounds:**

**OBSERVATION:**

*Is the fence strong and in good repair?*

*Are there weeds or trash adjoining the building that should be removed?*

*Are the fence gates properly locked?*

*Does lighting illuminate all roads, buildings, doorways, parking Lots?*

**RECOMMENDATIONS:**

**Minimum:**

**Maximum:**

**B. Natural Barriers / Territorial Enforcement**

**OBSERVATIONS:**

Shrubbery near windows, doors, gates, garages, and access roads being kept to a minimum?

What are the physical boundaries of the residence’s grounds?

Is proper signage in place?

**Minimum:**

**Maximum:**

**Section Four**

**Exterior Controls**

**A. Exterior Doors:**

**OBSERVATIONS:**

*Are all doors strong and formidable?*

*Are all door hinge pins located on the inside?*

*Are all door frames well-constructed and in good condition?*

*Are the exterior locks double cylinder, dead bolts, or jimmy proof?*

*Identify Door: Wood, Metal, Glass, Double, Single, Door Lites, Hinges etc.*

**RECOMMENDATION: (includes locks, style, hinges, viewer, frame)**

**Minimum:**

**Maximum:**

**B. Exterior Window:**

**OBSERVATIONS:**

Are nonessential windows bricked up or protected with steel mesh or iron bars?

Are all windows within 14 feet of the ground equipped with protective coverings?

Is security glass used in any of these windows?

Are windows located under loading docks or similar structures protected?

**RECOMMENDATION:**

**Minimum:**

**Maximum:**

**C. Exterior Walls:** (General Description of condition)

**OBSERVATIONS:**

**RECOMMENDATIONS:** (General Description of condition)

**Minimum:**

**Maximum:**

**D. Roof:** (General Description of condition)

**OBSERVATIONS:**

**RECOMMENDATIONS:**

**Minimum:**

**Maximum:**

**E. Other Exterior Openings:**

**OBSERVATIONS:**

Do you have a lock on manholes that give direct access to your building or door?

Are your sidewalk doors or grates locked properly and secured?

Do fire escapes comply with city and state fire regulations?

Can entrance be gained from an adjoining building?

**RECOMMENDATIONS:**

**Minimum:**

**Maximum:**

**F. Exterior Lighting**

**OBSERVATIONS:**

Is the lighting adequate to illuminate critical areas (alleys, fire escapes, ground level windows)?

Is there sufficient illumination over entrances?

*Is there an auxiliary system that has been tested?*

*What Lighting Type and how many external lights?*

**RECOMMENDATIONS:**

**Minimum:**

**Maximum:**

**Section Five**

**Interior Physical Characteristics**

**A. Internal Operations:**

**OBSERVATIONS:**

*Which hours and days represent high-activity use?*

*How many people have access to the site?*

*List the number of rooms occupied by the various departments and offices.*

*What area contains the most sensitive material?*

**RECOMMENDATIONS:**

**Minimum:**

**Maximum:**

**B. Interior Lighting:**

**OBSERVATIONS:**

*Is there a backup system for emergency lights?*

*Is the lighting provided during the day adequate for security purposes?*

*Is the lighting at night adequate for security purposes?*

*Is the night lighting sufficient for surveillance by the local police department?*

**RECOMMENDATIONS**:

**Minimum:**

**Maximum:**

**C. Interior Doors:**

**OBSERVATION:**

Are doors constructed of a sturdy and solid material?

What type of hinges, and is there a need for peep hole?

Are interior doors equipped with locks, door returns, safety bars?

**RECOMMENDATION:**

**Minimum:**

**Maximum:**

**E. Interior Offices:**

**OBSERVATION:**

Are office doors locked when unattended for long periods?

Does the receptionist desk have a clear view of the entrance, stairs, and elevators?

Are maintenance people and visitors required to show identification to the receptionist?

Are desks and files locked when the office is left unattended?

**RECOMMENDATION:**

**Minimum:**

**Maximum:**

**F. Key Control**

**OBSERVATIONS:**

How many keys are issued?

How many master keys?

Is there a key control system?

What is the basis of issuance of keys? Are keys marked “Do Not Duplicate”?

**RECOMMENDATIONS:**

**Minimum:**

**Maximum:**

**G. Internal Locks:**

**OBSERVATIONS:**

*Are all entrances equipped with secure locking devices?*

*Are they always locked when not in active use? (If not, why not?)*

*Is the lock designed or the frame built so that the door cannot be forced by spreading the frame?*

*Are all locks in working order?*

**H.** **Petty Cash / Money Control:**

**OBERSERVATION:**

*How much petty cash is kept?*

*Are funds kept to a minimum?*

*Where is petty cash secured?*

*Are funds kept overnight in a safe, locked desk, or file cabinet?*

*When are bank deposits made?*

**RECOMMENDATION:**

**Minimum:**

**Maximum:**

**I. Safes:**

**OBSERVATIONS:**

*What methods are used to protect the safe combination?*

*Are combinations changed or rotated immediately on resignation, discharge, or suspension of an employee having possession of the combination? If not, why not?*

*Where is (are) the safe(s) located?*

*Is it well-lit at night?*

**RECOMMENDATION:**

**Minimum:**

**Maximum:**

**J. Inventory Control:**

**OBSERVATIONS:**

*When was the last time an inventory of business equipment was made, listing serial numbers and descriptions?*

*Were any items missing or unaccounted for?*

*Are all computers and similar equipment bolted down or otherwise secured?*

*Has the firm marked all its business equipment?*

**RECOMMENDATION:**

**Minimum:**

**Maximum:**

**K. Security Cameras, Alarm Systems, Information Technology:**

**OBSERVATIONS:**

*What type of alarm system is it, make, model, and manufacturer?*

*Who maintains it (maintenance) and how often is it serviced (checked), date of last service?*

*What is the total number of sensors and types?*

*What is the type of camera, type, model, how many, and the angle of coverage?*

**RECOMMENDATION:**

**Minimum:**

**Maximum:**

**Section Six**

**Conclusion:**

**A. Awareness:**

Describe what their *Internal and External Theft strategy* is, and how they implement it daily (Use the crime triangle below and refer to it when talking about prevention).

Describe *Robbery Awareness* and list what they are doing to inform employees.

Describe their *corporate policy towards Workplace Violence / Active Shooter* using the examples given in CP 2 PowerPoint.

Go over and review *Policy and Procedure.*

Any Additional observations, findings, and recommendations.

Desire

Ability

Crime

Opportunity

**B. Summary:**

*Overall building security findings and summary of the report.*

**C. LIABILITY DISCLAIMER: The implementation of all or any portion of the**

**recommendations in this Security Assessment of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of the site as listed on the cover of the report) are NO guarantee or assurance that crime will go down, nor will they make the property crime-proof. The recommendations should, however, reduce the *probability* of crime if the strategies and recommendations are properly applied and consistently maintained.**

**TCPA Instructor Review:** \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

**(Initials) (Date)**

**Police Supervisor Review:** \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_­­\_

**(Initials) (Date)**

**CF:**

1-Owner

1-Department File



***“Work with your local law enforcement – together we can make a difference”***