

Sections marked with * are mandatory fields. appropriate boxes

* Name of Area/Industry Group/Council:	
* Boundaries (Geographical Business Watch only):	
* Existing Group: <input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, Business Watch Register No: (leave blank if new application)
* Number of businesses in Area/Industry Group:	*i.e. Number indicating a willingness to join
Reason for application (as many responses as applicable)	
<input type="checkbox"/> Business/industry pressure for initiative	<input type="checkbox"/> Identified need for increased security
<input type="checkbox"/> Community pressure for initiative	<input type="checkbox"/> Other, specify:
<input type="checkbox"/> Rising local crime rates (real or perceived)	

NOMINATED COORDINATOR / CONTACT

* Name:		
* Business/Industry/Council Name or Department		
* Work Address & Postcode:		
* Work Telephone:	Work Facsimile:	Mobile:
Home Address & Postcode:		
Email address:		

NOMINATED POLICE LIAISON OFFICER / CONTACT:

* Name:		
* Posting & Internal P/C:		
* Work Telephone:	Work Facsimile:	Mobile:
Email address:		

ADMINISTRATION

Proposed administration system: <input type="checkbox"/> 1. Stand Alone Committee <input type="checkbox"/> 2. Incorporated into existing Committee.
If 2. Name of Committee/Department:
If 2. Is Business Watch to be a standing Agenda item? <input type="checkbox"/> YES <input type="checkbox"/> NO
* It is preferred that Business Watch meetings are held at least quarterly, is this possible <input type="checkbox"/> YES <input type="checkbox"/> NO

OPERATION

* Does this proposed Business Watch have a capacity to deliver newsletters/other resources? <input type="checkbox"/> YES <input type="checkbox"/> NO
* Is there an ability to develop a communication network to support Business Watch? <input type="checkbox"/> YES <input type="checkbox"/> NO
Does the proposed area/industry group currently produce publications for its membership? <input type="checkbox"/> YES <input type="checkbox"/> NO
Is it intended that this Business Watch produce its own newsletter for the information of members? <input type="checkbox"/> YES <input type="checkbox"/> NO

OTHER INFORMATION

Any other information you wish to include to support his application:	You may attach further materials or use this form:

* Date application completed	Lodged at	Police Station on
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FORWARD TO WATCHSA UNIT (74)

OFFICE USE ONLY: Date received WatchSA Unit / / / / /

Application was approved declined returned for further information/clarification on / / .

Relevant Crime Prevention Section advised at hours on / / by

PCO File No.:
