



Dana Point Police Services CONFIDENTIAL INFORMATION FORM

DANA POINT RESIDENTS ONLY PLEASE

Name:												
Address:												
City:												
Home Phone:	:Cell Phone:											
Email Addres	ss: _											
Homeowner's	s As	soci	iatic	n: _								
Are you interested in participating in our Neighborhood Watch program?											YES	NO
Are you interested in receiving safety information and tips?										YES	NO	
One a scale o following isso (Please circle	ues t	hat	you	are	con	cerned about				tant, pl	ease rate	the
DRUGS	1	2	3	4	5							
THEFT	1	2	3	4	5							
TRAFFIC	1	2	3	4	5							
GRAFFITI	1	2	3	4	5							
Additional Co	omn	nent	s: _									

For more information, please contact:
Community Services Officer Jill Jackson
Dana Point Police Services, Community Service
Unit (949) 248-3581 or jnjackson@ocsd.org