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| **[http://www.safetyfirstm.com/templates/safetyfirst2015/images/logo-1979752923.png](http://www.safetyfirstm.com/index.php)SECURITY**  **REPORTING FORM**  Office (780)-888-3926  www.safetyfirstm.com | | | | | |
| **SITE NAME** | | | | **DATE:** | **SECURITY OFFICER NAME** |
| □DAY SHIFT □NIGHT SHIFT General Location: | | | | | |
|  | □SUNDAY □MONDAY □TUESDAY □WEDNESDAY □THURSDAY □FRIDAY □SATURDAY | | | | | |
| **Event or Patrol Time** | | **Specific Location** | **Security officer must log each patrol, security check, surveillance system check, and all pertaining information.** | | | |
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Security officer must report fire, vandalism, & theft to TC Energy representative. SFM manager must be immediately notified.

SECURITY OFFICER SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SFM MANAGER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_