



Lakewood Police Dept.

VACATION HOUSE CHECK



PLEASE PRINT - BLACK INK ONLY

Owners Name (print only)	Cell Phone
Address	Zip Code
Depart Date and Time	Return Date and Time

Alarm? Y N If yes, might the alarm go off if doors are firmly checked? Y N	
Name of Alarm Company	Phone
Door screens unlocked? Y N (Note: Should be left unlocked so doors can be checked)	
Any lights on timers? Y N Where?	
Gardener/Maid? Y N Days M T W T F S Name:	
Gate(s) locked? Y N OK to go in back yard? Y N Dog in yard? Y N	
Number of vehicles in driveway 0 1 2 3 4	
Description of vehicle(s):	
Radio or TV left on inside house? Y N	
1 st Emergency Contact Name	Home Phone
Address	Cell Phone
Relationship	Has house key? Yes No
2 nd Emergency Contact Name	Home Phone
Address	Cell Phone
Relationship	Has house key? Yes No
Name(s) (if any) other than Emergency contact(s) authorized to be in the house:	
Comments or Special instructions:	

I request extra patrol of my property / residence between the dates listed above. I understand that the Lakewood Police Department will check my property / residence periodically, subject to their availability. I also understand that the Lakewood Police Department cannot provide constant protection of my property / residence, and therefore, I assign no liability to the Lakewood Police Department for any damage / criminal act to my property during the above listed dates.

^

^

Signature: _____ Date: _____