

Timberlake Police Department

Vacation House Check Form

Date + Time Received:	Officer Receiving
Name:	Home Phone
Address:	Cell/Work Number
Date Leaving:	Date Returning
Time Leaving:	Time Returning

Emergency Contact Person: _____

Emergency Number: _____

Do they have a key: YES or NO

Do you have an alarm system?..... **YES or NO**
 YES or NO

Company Name: _____ Phone: _____ YES or NO

Will there be any inside lights left on: ☐ YES ☐ NO

Are the inside lights on timers: YES or NO

What lights will be left on: **Kitchen / Living Room / Hallway / Family Room Bedroom / Garage /**
Others _____

Other: _____
Will there be any other items to be discussed? _____

Will there be any outside lights left on: ☐ YES ☐ NO

Are the outside lights on timers: YES or NO

Are motion activated YES or NO

Are motion activated YES or NO

Other: YES or NO

Other: _____

Do you have any broken doors, windows, or _____

Do you have any broken doors, windows, or torn screens?..... **YES or NO**
If so, location:.....

Will you stop your mail & newspaper delivery?

If not, is someone collecting them for you? YES or NO

Are pets in the house or yard? **YES or NO**

If so, type of pet and person caring for them? Type of pet: _____ YES or NO

Contact Name: _____ Phone: _____

Describe vehicles or property left outdoors, while on vacation: _____

1. Make: _____ Model: _____ Color: _____ Year: _____ License #: _____

2. Make: _____ Model: _____ Color: _____ Year: _____ License #: _____ State: _____

Date	Time	Officer#	Results	Date	Time	Officer#	Results
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