



Bruce Brooks  
Chief of Police

Michael Boals  
Deputy Chief



## HOUSE CHECK REQUEST



Name: \_\_\_\_\_ Date \_\_\_\_\_

Number(s) you can be reached at on Vacation: ( ) \_\_\_\_\_ ( ) \_\_\_\_\_

Exact Location/Address of Residence: \_\_\_\_\_

Date Leaving: \_\_\_\_\_ Date Returning: \_\_\_\_\_ Time Leaving: \_\_\_\_\_ Time Returning: \_\_\_\_\_

Kind of Animals left at Residence & Their Location: \_\_\_\_\_

Any Lights on Timers? ( Yes or No ) List their Location(s) & On/Off Times: \_\_\_\_\_

Will you have any radios, TVs or any other items left on or on timers? ( Yes or No ) List their Location(s) & On/Off Times: \_\_\_\_\_

Will anyone be checking on house, watering plants, checking on animals, etc? ( Yes or No )

Name \_\_\_\_\_ Home Number ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Other Number ( ) \_\_\_\_\_

Local Emergency Contact Person:

Name \_\_\_\_\_ Home Number ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Other Number ( ) \_\_\_\_\_

Any additional information you would like to provide? \_\_\_\_\_

Your home or business will be checked when time and personnel are available and as often as can be managed. We encourage you to ask your neighbor(s) or relatives to check your home or business regularly. Homes that are vacant for periods in excess of two (2) weeks place no obligation on the department, which at times cannot be fulfilled

Read to Caller/Owner and Initial: \_\_\_\_\_