Vacation Home Protection Service

Directions:

1. All information will be completed on this form.
2. Officers will visit at different times on each occasion.
3. When homeowner/tenant returns, the officer will note and return to administrator.

Date of Departure _____ **Date of Return** _____

Resident's name _____ **Emergency Contact** _____

Resident's address _____ **contact address** _____

Resident's phone _____ **contact phone** _____

Keys left with (if other than emergency contact) _____

Lights timers ☐ on ☐ off

Location of lights on timers _____

Other information:

_____

Police visitation record

Date_____**Time**_____**Condition**_____**Officer**_____

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