



VACATION HOUSE WATCH

RESIDENT INFORMATION		OTHER INFORMATION	
Name:		Date/Time Leaving:	
Address:		Date/Time Returning:	
Phone:	Emergency Phone:	Animal(s) in house?	Y <input type="checkbox"/> N <input type="checkbox"/>
Note: There is a two-week limit on house watches. Please ensure all animal waste, hazards, and debris are removed from around your home. Unlock gates to allow access to the back yard.		Paper Discontinued?	Y <input type="checkbox"/> N <input type="checkbox"/>
		Mail Discontinued?	Y <input type="checkbox"/> N <input type="checkbox"/>
Alarm Company Name:		Animal Waste Removed?	Y <input type="checkbox"/> N <input type="checkbox"/>
Phone Number:		Hazards and Debris Removed?	Y <input type="checkbox"/> N <input type="checkbox"/>
Lighting Timer(s)? Y <input type="checkbox"/> N <input type="checkbox"/> If Yes, Location(s):		Gates Locked?	Y <input type="checkbox"/> N <input type="checkbox"/>
Motion Light(s)? Y <input type="checkbox"/> N <input type="checkbox"/> If Yes, Location(s):			
Video Surveillance? Y <input type="checkbox"/> N <input type="checkbox"/> If Yes, Location(s):			
EMERGENCY CONTACT		VEHICLE INFORMATION	
Person Watching House:		Vehicle Year:	Location: <input type="checkbox"/> Garage <input type="checkbox"/> Driveway
Address:		Make:	
Telephone:		Model:	
Allowed on Premise? Y <input type="checkbox"/> N <input type="checkbox"/>		Color:	
Has Key to Premise? Y <input type="checkbox"/> N <input type="checkbox"/>		License Number:	
ADDITIONAL EMERGENCY CONTACT		VEHICLE INFORMATION	
Person Watching House:		Vehicle Year:	Location: <input type="checkbox"/> Garage <input type="checkbox"/> Driveway
Address:		Make:	
Telephone:		Model:	
Allowed on Premise? Y <input type="checkbox"/> N <input type="checkbox"/>		Color:	
Has Key to Premise? Y <input type="checkbox"/> N <input type="checkbox"/>		License Number:	
ADDITIONAL INFORMATION			

I REALIZE AND HEREBY RELEASE THE BARTLETT POLICE DEPARTMENT FROM ANY CLAIMS FOR DAMAGES SUSTAINED AT THE ABOVE-MENTIONED RESIDENCE WHILE I AM AWAY FROM IT AND AGREE TO NOT HOLD THEM LIABLE IF DAMAGES DO OCCUR.

Date

Signature

Please call us when you return! 630-837-0846

11-27-2024

Frontline entry: _____