

VACANT HOUSE CHECK FORM



Chief of Police
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*** This form is valid for no more than 30 days ***

Directions: Please print legibly and fill out all requests for information. If a section is not applicable mark "N/A, NO or NONE." This form is front and back.

HOME OWNER(S) NAME:

ADDRESS: , PELHAM, NH 03076

HOME PHONE: () -

CELL PHONE: () -

EMAIL:

DATE LEAVING:

DATE RETURNING:

EMERGENCY CONTACT AND KEYHOLDER INFORMATION:

LOCKBOX CODE OR KEY HIDE (INCASE ENTRY MUST BE MADE BY EMERGENCY PERSONNEL):

BRIEF DESCRIPTION OF RESIDENCE:

NAME(S) OF WHO IS AUTHORIZED TO BE ON THE PROPERTY WHILE YOU'RE AWAY? (PLEASE INCLUDE THEIR **LICENSE PLATE NUMBER AND VEHICLE DESCRIPTION**):

ARE YOU LEAVING ANY VEHICLES IN THE DRIVEWAY? (PLEASE DESCRIBE SAME AS ABOVE):

ARE YOU LEAVING ANY VEHICLES IN THE GARAGE? (PLEASE DESCRIBE SAME AS ABOVE):

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LIGHTS ON TIMER? YES NO

LIGHTS ON ALL THE TIME? YES NO

ANY OUTSIDE LIGHTS? YES NO

ARE YOU LEAVING ANY PETS HOME? (IF SO, PLEASE NOTE TYPE OF PET, NAME THEY RESPOND TO, IF THEY ARE FRIENDLY OR AGGRESSIVE AND WHERE THEY WILL BE LOCATED WHILE YOU ARE AWAY):

IF HOUSE IS ALARMED, WHAT TYPE OF SYSTEM?

AUDIBLE ONLY XFINITY HONEYWELL ADT CENTRA-ALARMS
PROPERTY PROTECTION LIFE SHIELD PROTECTION 1 AMERICAN ALARM

OTHER:

ALARM COMPANY PHONE NUMBER: () -

ANY FURTHER PERTINENT INFORMATION YOU WOULD LIKE TO PROVIDE:

YOUR SIGNATURE:

X _____

To be filled out by Police Department:

DATE AND TIME RECEIVED:

RECEIVED BY DISPATCHER:

DATE TYPED:

TYPED BY DISPATCHER: