



PINE BEACH POLICE DEPARTMENT

VACATION HOUSE CHECK

E-MAIL THIS DOCUMENT AS AN ATTACHMENT TO: Cjuliano@pinebeachpolice.gov

NAME: _____

ADDRESS: _____

PHONE: _____

DATE OF PATROL REQUEST

From: _____	To: _____
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LIGHTS LEFT ON: Front Porch Back Porch Garage Living Room Kitchen
 Hallway Bathroom

Are lights on an automatic timer? Yes No

Are any of the following present? Dog(s)/Cat(s) in Yard Dog(s)/Cat(s) in House Alarm System
 Outside Motion Detector Locked Gates House Sitter(s)

Please list any vehicle(s) left at the residence, or those of the sitter(s):

MAKE	MODEL	COLOR	YEAR	TAG (State & Number)

Please list any emergency contact/persons with access to house:

NAME	ADDRESS	PHONE NUMBER

REQUEST NOTIFICATION BY OFFICER IN CASE OF EMERGENCY?

YES NO

EMERGENCY CONTACT	ADDRESS	PHONE NUMBER

FURTHER COMMENTS: _____

PLEASE CONTACT THE POLICE DEPARTMENT AT 732-341-2824 WHEN YOU RETURN.