## VACATI ON/ HOUSE CHECK REQUEST

I request a house watch to be made of my premises and agree to notify Montgomery Twp. Police of my return. Note: *=required entries

## General Information:

| *Your name: |  |
| :--- | :--- |
| *Street Address: |  |
| *City, State, Zip: |  |
| *Phone, including area code: |  |
| *Email Address: |  |
| *Departure Date: |  |
| *Departure Time: |  |
| *Return Date: |  |
| *Return Time: |  |

## Emergency Contact:

| Name: |  |
| :--- | :--- |
| Address: |  |
| Phone, Home: |  |
| Phone, Cell: |  |
| Phone, Work: |  |

Vehicles Left on Premises:

Vehicle \#1:

| Color: | Make: |
| :--- | :--- |
| License Plate: | Location: |

Vehicle \#2:

| Color: | Make: |
| :--- | :--- |
| License Plate: | Location: |

Vehicle \#3:

| Color: | Make: |
| :--- | :--- |
| License Plate: | Location: |

## People with permission to be on the property while you are away:

## Permission 1

Name:
Vehicle Make, Model, Color:
Permission 2
Name:
Vehicle Make, Model, Color:

## Keyholder information:

## Contact name:

Phone, including area code:
In Case of an Emergency:
*In case of an emergency, do you wish to be notified? $\square$
If yes, please list location and phone number to notify:
Location (City, State, Country):
Phone, including area code:

## Additional Helpful Information:

Please list any info that may be helpful to our officers. Include things such as broken windows, missing screens, lights on timers, dogs on premises, etc.

AUTHORIZATION: By saving and emailing this form, I hereby authorize the action requested and/or police use of the information supplied. I certify that all info as entered is true and correct. I am aware that by submitting this form, my Internet IP address will be made known to the Montgomery Twp. Police Department and can be traced if false information is provided.

Please SAVE this form first, then email to: Inix@police.montgomery.nj.us or use Submit button below.

## Submit

