

# DANA POINT POLICE SERVICES

## Vacation Home Check



Date to START Check:

Date to END Check:

Name:		Phone:	
Address:			
Cross Streets:		Gate Code:	

Should we expect to see any services (i.e. gardener, house/pool cleaner)?	Yes <input type="checkbox"/> No <input type="checkbox"/>	When? And Who?
Are there any pets in the yard?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Describe:
Will there be any vehicles in the driveway?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Describe:
Will you have a neighbor/ friend check on the property?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Who? When? Do they have a key?
Does anyone else have a key?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Who?
Does your home have an alarm?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Alarm Company contact info:
Will the house be vacant?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you stopped mail/paper delivery?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Additional Information:		

In Case of Emergency, please contact:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Do they have your key? Yes  No

Vacation Check Requested by: \_\_\_\_\_

Date: \_\_\_\_\_

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Received in Police Services by: \_\_\_\_\_

Date: \_\_\_\_\_