## Pine Grove Borough Police Department



One Snyder Avenue Pine Grove, PA 17963 (570) 345-8100

## **VACATION HOUSE CHECK FORM**

Page 1 of 2

(PLEASE PRINT)
PLEASE ARRANGE FOR MAIL AND NEWSPAPER PICKUP. PLEASE CALL POLICE WHEN
YOU RETURN. EFFECTIVE FOR NO LONGER THEN 30 DAYS. IF YOU PLAN ON BEING
AWAY LONGER, PLEASE MAKE OTHER ARRANGEMENTS TO HAVE YOUR HOME
CHECKED. THIS REQUEST WILL EXPIRE ON DATE LISTED AS "RETURNING".

Date of request:			
Name:	Telephone:		
Address to be checked:			
Nearest Cross Street:	Color of house:		
Is house number visible from street? Yes No	Color of house:  If not, how can we identify your house:		
Date Leaving	Date Returning:		
Owner contact info:	Cell/OtherEmail		
Person(s) caring for the home while you are away on Name:	or emergency contact: Telephone:		
Name: No No	Telephone:		
Lights on? Yes No If so, Where?			
Drapes: Open Closed			
Alarm: YesNo Company:	Telephone:		
Vehicles: YesNoMakeModel_ Color:Parked in: garage	Year License plate #		

Vehicles: Yes	s	No	Make	Model	Year	License plate #
Color:			Par	ked in: garage	street drivew	vay
			VACA		USE CHE ge 1 of 2	CK FORM
Release:						
and visually in police to enter owner or pers is a voluntary, depending upon damage to the employees ansuffered throup PLEASE CA	nspec r my l son can , free on we e prem d agen igh an	t the honouse fring for service ather a hises. That for y actio	ouse exterior further or the house and does and available undersiany and all n or lack to the bulker of the bulker	or. Should an coinspection. The who is listed a not create a speale time. No guagned agrees to I claims for perhereof by a rep	pen entry be for police will attribove. The undecial duty upon a rantee is made hold harmless sonal injury, for resentative of the AT (570) 345	rtment to have officers enter my property bund, the undersigned authorizes the tempt to secure the house and contact the dersigned understands and agrees that this is the Borough, and will be provided to nor assurance given against loss, theft of the Borough of Pine Grove, its loss or damage to property that may be the Borough of Pine Grove.  5-8100 WHEN YOU RETURN.
Signature of h	omeo	wner:				
						·
Office use						
Date reque	st re	ceived	l:	Receiv	ed by:	
Date reside Return noti	ent re ificat	turne	d: eceived b	Notified	d by:	