

Vacant Home Check Form

Your Contact Information:

Name: _____

Address: _____

Telephone: _____

Contact in Case of Emergency:

Name: _____

Address: _____

Telephone: _____

Vacation Details:

Destination Address & Phone: _____

(Hotel, Room #, etc.)

Date of Departure: _____

Time of Departure: _____

Date of Return: _____

Time of Return: _____

Location to be Checked:

Address to be checked: _____

Details on Location (Vehicles on premises, _____

lights left on, pets, alarms, etc.) _____

Other persons allowed on premises: _____

(Name and Address)

Any history of suspicious activity? Yes No

Additional Information:
