



LACEY POLICE VACATION HOUSE CHECK REQUEST

Requests must be received at least 72-hours prior to leaving to allow for processing.

Name: _____ **Date of Request:** _____
Address: _____ **Email:** _____
Phone: _____ **Alt. Phone:** _____
Leaving: _____ **Est. Return Date:** _____
MM/DD/YYYY Approx. Time MM/DD/YYYY

I can be reached at: Address: _____
Phone: _____

Emergency contact(s):

Name: _____ Work: _____
Address: _____ Cell: _____
Name: _____ Work: _____
Address: _____ Cell: _____

Check all that apply

Vehicles/trailers left OUTSIDE at residence?

<u>Make</u>	<u>Model</u>	<u>Color</u>	<u>License Plate</u>
_____	_____	_____	_____
_____	_____	_____	_____

Backyard access?
Alarm System? Company: _____
Lights/TV on? Automatic Constant
Pets left at residence?
Guest while you're away? *PLEASE NOTE: the home will not be checked during these dates.*

Name _____ Dates (from/to) _____

The undersigned does hereby grant and request the City and its Police Department to visually check upon the property listed above. The undersigned does hereby agree to hold harmless the City, its employees and agents for any and all claims for personal injury, loss or damage to property that may be suffered by the undersigned through any action or lack thereof by a representative of the City. Further, the undersigned understands and agrees that this is a voluntary, free service, does not create a special duty upon the city, will be provided only as time is available, and no guarantee is made, nor assurance given against loss, theft or damage to premises.

Signature

Date

FOR LACEY POLICE DEPARTMENT USE ONLY

ID of requestor verified by [print name]

Signature