

HOUSE CHECK FORM

Please Fill Out and Attach to e-mail to police@cityofwarrenpa.gov

Section 1 General Information

*DATE: Day Month Year *EMAIL:

*NAME: First Last

*ADDRESS: Street City Zip

* PHONE: *Mobile

*REASON FOR REQUEST: i.e. Vacation etc.

*DEPARTURE DATE: Day Month Year *RETURN DATE: Day Month Year

Section 2 Destination Information

*DESTINATION ADDRESS: Street City

Section 3 Property Security & Hazard Information

SECURITY SYSTEM: YES: NO:

AUTOMATIC LIGHT: YES: NO: IF YES, LOCATION:

ANY HAZARDS AT RESIDENCE (I.E. GUNS, ANIMALS, ETC.): YES: NO:

IF YES, LOCATION & DETAILS:

WILL ANYONE BE WORKING ABOUT OR HAVE ACCESS TO PREMISES DURING YOUR ABSENCE? YES: NO:

IF YES, NAME:

Incident Number _____

Officer Badge Number _____

Section 4 Emergency Contact Information

HAVE KEYS BEEN LEFT WITH ANYONE? YES: NO:

IF YES, NAME:

ADDRESS: Street City Zip

PHONE: Home Mobile

If the person you left the keys with is different than your Emergency Contact Person please provide that information below:

NAME:

ADDRESS: Street City Zip

PHONE: Home Mobile

COMMENTS:

I REQUEST A SECURITY CHECK BE MADE OF MY PREMISES. I WILL ALSO NOTIFY YOU IF MY RETURN DATES CHANGES.*

This security check service in no way guarantees that your property will be safe from vandalism or burglary, but merely provides the City of Warren Police Department with information of your whereabouts and other pertinent facts if a crime should occur. This is designed to be a temporary service and will automatically be discontinued on your return date or at the end of 120 days, whichever comes first. Continuation of a house check beyond 120 days must be approved by the Chief of Police.