PITTSBORO POLICE DEPARTMENT VACATION HOUSE CHECK REQUEST FORM

The Pittsboro Police Department will make every attempt to check on your residence while you are away. Please provide emergency contact information in the event of an emergency with your property.

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DATE OF REQUEST:				
OWNED WEODMATION				
OWNER INFORMATION NAME OF OWNER:				
NAME OF OWNER.				
CTREET ADDRESS				
STREET ADDRESS:				
PHONE NUMBER:				
DATE LEAVING:		DATE RETURNING:	DATE RETURNING:	
VEHICLES LEFT ON PREMISES				
COLOR	YEAR	MAKE	LICENSE #	
LIGHTS: (ON/OFF OR LIST	WHEN AUTOMATIC TIMERS GO ON AND	OFF)		
EIGHTS. (ON) OTT ON EIST WITEN ACTOMATIC TIMENS GO ON AND OTT)				
PROTECTED BY ALARM SYSTEM (IF YES, NAME AND TELEPHONE NUMBER OF ALARM COMPANY)				
THOTEGIED BY ALARMY 3131EM (II 163, NAME AND TELEFHONE NOMBER OF ALARMY COMITANT)				
LOCATION AND TELEPHONE NUMBER WHERE OWNER CAN BE REACHED:				
ECCATION AND TELEFITONE NOWIDER WHERE OWNER CAN BE REACTED.				
EMERGENCY CALL INFORMATION				
The following person(s) are authorized to enter and will be looking after my property. FIRST PERSON NAME AND PHONE NUMBER:				
FIRST PERSON	I WINE AND THORE NO MEETING			
SECOND PERSON	NAME AND PHONE NUMBER:			
THIRD PERSON	NAME AND PHONE NUMBER:			
NOTE: IN THE EVENT OF AN EMERGENCY, THE ABOVE PERSONS WILL BE CALLED IN ORDER				
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