

Vacation House Check Request

Forks Township Police Department
1604 Sullivan Trail
Easton, PA 18040
610-252-0377
610-759-2200 Non-Emergency

Please provide all of the requested information.

Name: _____

Address: _____

Date leaving and Date returning: _____

Preference of house check: Drive By _____ Physical _____

Emergency Contact(s)

1. Name: _____ Phone Number: _____

2. Name: _____ Phone Number: _____

Does the above named party have a key to the property: YES _____ NO _____

Vehicles Left outdoors:

Make: _____ Model: _____ Make: _____ Model: _____

Residence alarmed: YES _____ NO _____ If so, with whom: _____

Mail Stopped: YES _____ NO _____

List of lights that will be on or set on timers (Please list approx. times of on & off)

Signature: _____