

SWINOMISH POLICE DEPARTMENT

VACATION CHECK

Name: _____

Phone Number: (.)

Address: _____ Shelter Bay

Departure Date: _____ Return Date: _____

Trip route where may be contacted at: _____

Type of premise: Residence: Business: Other _____

Are there timer lights: Yes No if yes where:

Have keys been left with anyone? Yes No If yes with whom:

Name: _____ Phone: _____

Address: _____

Will anyone be working or have access to premise during absence?

Yes: No: If yes Name: _____

Are there any vehicles left parked in driveway or street? Yes No

If yes describe:

In case of emergency do you wish to be notified by collect call? Yes No

CIO Name: _____ Phone: (____)

Address: _____

I request a security check be made of my premises and agree to notify police department of my return.

Signed:

Date:

Please complete and hand deliver to the Swinomish Police Department.