

# AMITY TOWNSHIP POLICE DEPARTMENT

2004 WEAVERTOWN ROAD, DOUGLASSVILLE, PA 19518

(610) 689-6002

## VACATION HOUSE CHECK REQUEST

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Type of Dwelling: Single Family Residence  Duplex  Condominium

Name: \_\_\_\_\_

Address: \_\_\_\_\_

### PERSON WHO CAN RESPOND IN AN EMERGENCY:

The following person(s) are authorized to enter the property, or in case of emergency contact:

1. Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: \_\_\_\_\_

Or

2. Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: \_\_\_\_\_

Does the above named party(s) have a key to the property? Yes  No

Does premises have an alarm? \_\_\_\_\_ Type: \_\_\_\_\_

Alarm Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Lights left on? Yes  No  Where? \_\_\_\_\_ Timer? Yes  No

Are there any animals on the premises? \_\_\_\_\_

Type/Location: \_\_\_\_\_

Person responsible for their care: \_\_\_\_\_

Telephone No: (day) \_\_\_\_\_ (evening) \_\_\_\_\_

### PERSONS WHO HAVE ACCESS TO THE PREMISES/ADDITIONAL DATA:

(I.e. gardener, cleaning person, neighbor, etc.)

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(over)

**PROPERTY INFORMATION:**

1. Do you have any broken doors or windows? Yes  No
  2. Do you have any torn screens? Yes  No
  3. Do you have timers on any indoor/outdoor lights? Yes  No
  4. Will you stop your mail & newspaper delivery? Yes  No  If not, is someone collecting them for you? Yes  No  If yes, Name: \_\_\_\_\_
- Phone: \_\_\_\_\_
5. Do you want your backyard checked? Yes  No  (Locked gates will not be opened)
  6. When are your sprinklers timed to turn on and off? \_\_\_\_\_

**DESCRIBE VEHICLES OR PROPERTY LEFT OUTDOORS WHILE ON VACATION:**

1. Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Yr \_\_\_\_\_ Lic# \_\_\_\_\_ State \_\_\_\_\_
2. Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Yr \_\_\_\_\_ Lic# \_\_\_\_\_ State \_\_\_\_\_

**Other Property:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Note: Be sure to make arrangements for your mail/newspaper and for lawn care/snow removal.**

The undersigned authorizes the Amity Township Police Department to have officers enter my property and visually inspect the house exterior. Should an open entry be found, the undersigned authorizes the police to enter my house for further inspection. The police will attempt to secure the house and contact the owner or person caring for the house that is listed above. The undersigned understands and agrees that this is a voluntary, free service and does not create a special duty upon the Township, and will be provided depending upon weather and available time. No guarantee is made nor assurance given against loss, theft or damage to the premises. The undersigned agrees to hold harmless the Township of Amity, its employees and agents for any and all claims for personal injury, loss or damage to property that may be suffered through any action or lack thereof by a representative of the Township of Amity.

Date leaving: \_\_\_\_\_ Date Returning: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE CALL THE POLICE DEPARTMENT AT (610) 689-6002 WHEN YOU RETURN.**

