Earlham Police Department

140 S Chestnut Ave. Earlham, IA 50072

Vacation Watch Request

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Date: Leaving: _____ Date Returning: _____

Name and Phone Number of Person (s) with Keys to the Property:

Name: _____ Phone: _____

Name: _____ Phone: _____

☐ Yes ☐ No Any lights on timers left on?

☐ Yes ☐ No Do you have an alarm system?

☐ Yes ☐ No Will your garage entry door be locked (Door between garage/house)?

☐ Yes ☐ No Vehicle(s) in driveway (make/model/plate number) _____

_____

Officer ID:	Date:	Time:	Comments:

Complete form and return to:
Earlham Police Department 140 S Chestnut Ave. Earlham, IA 50072