



City of Woodland
PUBLIC SAFETY DEPARTMENT

DAN BELLINI, CHIEF



VACATION HOME CHECK REQUEST

Date of Request: _____

Print Name: _____ Contact Phone: _____

Residence Address: _____

Date & Time when house will be vacant: _____

Date & time that you plan on returning home: _____

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

1. NAME: _____ PHONE NUMBER: _____

ADDRESS: _____ Have Key? Y / N

2. NAME: _____ PHONE NUMBER: _____

ADDRESS: _____ Have Key? Y / N

Type of Dwelling: Single Family Residence Duplex Condominium

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:

Alarm Information:

Do you have an alarm system? YES / NO

Name and phone for alarm company: _____

5/11/16

Property Information:

1. Do you have any broken doors or windows? YES / NO If so, location: _____
2. Do you have any torn screens? YES / NO If, location: _____
3. Do you have timers on any indoor/outdoor lights? YES / NO If so, where are they located and when do they turn on or off? _____
4. Will you stop your mail & newspaper deliver? 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? _____
7. Are pets in the house or yard? YES / NO If so, type of pet and person caring for them?
Type of Pet: _____ Contact: _____ Phone: _____

Additional Information:

The undersigned does hereby grant and request the City of Woodland and the Police Department to visually check upon the property listed above. The undersigned agrees to hold harmless the City of Woodland, its employees and agents for any claim for personal injury, loss or damage to property that may be suffered by the undersigned, through any action or lack thereof, by a representative of the city of Woodland. Further, the undersigned understands and agrees that this a voluntary, free service and does not create a special duty upon the city, will be provided only as time or volunteer personnel is available, and no guarantee is made no assurance given against loss, theft, or damage to premises.

DATE SIGNED: _____

RESPONSIBLE PARTY: _____

FOR OFFICIAL USE ONLY

Police use only:

Map/Page #: _____

Checked by: _____

Date/Date: _____

Checked by: _____

Date/Time: _____

For more information please call Crime Prevention Unit at 530-661-7875.