

MADISON TOWNSHIP POLICE DEPARTMENT
Vacation Check List

DATE TAKEN: _____ DATE CANCELED _____

TAKEN BY _____ CANCELED BY _____

NAME _____ PHONE: _____

ADDRESS: _____ CITY _____ ZIP _____

LEAVING _____ / _____ / _____ RETURNING: _____ / _____ / _____

DESCRIPTION OF HOUSE: _____

KEY HOLDERS:

NAME: _____ ADDRESS _____ PH: _____

NAME _____ ADDRESS _____ PH: _____

NAME _____ ADDRESS _____ PH: _____

CARS ON PROPERTY:

YR _____ MAKE _____ COLOR _____ LOCATION _____ LIC. _____

YR _____ MAKE _____ COLOR _____ LOCATION _____ LIC. _____

YR _____ MAKE _____ COLOR _____ LOCATION _____ LIC. _____

PETS:

DOGS () CATS () OTHER () _____

INSIDE () CHAINED () KENNEL () FENCED IN YARD () LOOSE () GARAGE ()

PERSONS(S) FEEDING PETS: _____ PH: _____

LIGHTS: (CHECK IF APPLICABLE)

OUTSIDE () WHERE LOCATED _____ MOTION LIGHTS () _____

INSIDE () KITCHEN TIMER _____ TO _____ () LIVING ROOM TIMER _____ TO _____

() BEDROOM TIMER _____ TO _____ () FAMILY ROOM TIMER _____ TO _____

OTHER (EXPLAIN) _____

ALARMS: (CHECK IF APPLICABLE) AUDIBLE _____ DIALER _____

WHO TO NOTIFY: _____

OTHERS WHO MAY BE ON PROPERTY: (REPAIR WORK, HOUSE CLEANING, MOWING, INC.)

NAME: _____ TYPE OF WORK: _____

NAME: _____ TYPE OF WORK: _____

ADDITIONAL INFORMATION:

