



# GERVAIS POLICE DEPARTMENT

592 4<sup>th</sup> Street, PO Box 329, Gervais OR 97026



## Vacation Notification

Name \_\_\_\_\_ Date submitted \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date & Time of Departure \_\_\_\_\_ Date & Time of Return \_\_\_\_\_

### Local contact person:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Key available? \_\_\_\_\_

### Vehicles left on property (not including garaged vehicles):

Vehicle Make \_\_\_\_\_ Model \_\_\_\_\_ License No. \_\_\_\_\_

Vehicle Make \_\_\_\_\_ Model \_\_\_\_\_ License No. \_\_\_\_\_

Vehicle Make \_\_\_\_\_ Model \_\_\_\_\_ License No. \_\_\_\_\_

### Miscellaneous Information

Lights will be left on: Yes  No  If yes, location in home: \_\_\_\_\_

Pets in backyard? Yes  No  If yes, what type & how many: \_\_\_\_\_

Persons authorized on property: \_\_\_\_\_

### Alarms

Premise alarm? Yes  No  Alarm Company & Telephone Number: \_\_\_\_\_

### Additional information

In case of emergency, please provide your contact information for your destination (for example, cell phone, hotel phone number, etc.)

\_\_\_\_\_

I understand that house checks will be made as time allows. By signing this form, I release the City of Gervais from liability for any loss of property or damage occurring during the departure and return time period indicated above.

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

Note: Notification must be received 48 hours prior to departure.

Mail to: Gervais Police Department, P.O. Box 329, Gervais OR 97026