



AMELIA POLICE DEPARTMENT

Established 1900

Jeffrey Wood
Chief Of Police



VACATION CHECK REQUEST

Current Date: _____	
Your Name: _____	
Last Name	First Name
MI	
INFORMATION ABOUT YOUR HOME & VEHICLES	
Address: _____	
Your Phone No: (513) _____	
The home will be vacant from: _____ Until: _____	
Number of vehicles that will be parked at the home: _____	
Vehicle 1: _____	License Number: _____
Make, Model, Color & Year	
Located in: <input type="checkbox"/> Garage <input type="checkbox"/> Driveway <input type="checkbox"/> Street	
Vehicle 2: _____	License Number: _____
Make, Model, Color & Year	
Located in: <input type="checkbox"/> Garage <input type="checkbox"/> Driveway <input type="checkbox"/> Street	
HOW CAN WE REACH YOU?	
Where will you be staying? _____	
Name	Address
City	State
Zip	
Phone No: () _____	Cell Phone: () _____
LOCAL CONTACT (KEY HOLDER)	
Name: _____	Phone No: () _____
Address: _____	
Street	City
State	Zip
Alarm Company: _____	Phone No: () _____
PETS: _____	
LIGHTS: _____	
OTHER IMPORTANT INFORMATION _____	