

VACANT HOUSE INFORMATION

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

DATE & TIME VACATING: _____

DATE & TIME RETURNING: _____

PHONE # YOU CAN BE REACHED _____

LOCAL EMERGENCY #: _____

PERSON TO ASK FOR IN EMERGENCY: _____

DO THEY HAVE A KEY? _____

ANY LIGHTS LEFT ON? _____

IF LIGHTS ARE LEFT ON, WHERE ARE THEY LOCATED? _____

LIGHTS ON TIMERS? _____

IF SO, WHERE ARE THEY AND WHEN DO THEY GO ON/OFF? _____

IS THERE AN ALARM SYSTEM? _____

IS IT SET? _____

ARE THERE CARS PARKED IN THE DRIVEWAY? _____

DESCRIPTIONS OF VEHICLES IN DRIVEWAY? _____
