

CONCORD POLICE DEPARTMENT  
VOLUNTEERS IN POLICE SERVICE

VACATION HOUSE CHECK

DATE/TIME of DEPARTURE \_\_\_\_\_ DATE/TIME of RETURN \_\_\_\_\_  
(Notify us immediately if departure or return times change) **60 DAYS IS THE MAXIMUM ALLOWED**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_ CROSS STREET \_\_\_\_\_

**LOCAL EMERGENCY CONTACT:** You **must** designate a local contact person.

NAME \_\_\_\_\_ DAYTIME PHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DO THEY HAVE KEY? \_\_\_\_\_

**VEHICLES LEFT ON PROPERTY: (DO NOT INCLUDE VEHICLES IN GARAGE)**

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Lic# & State \_\_\_\_\_  
Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Lic# & State \_\_\_\_\_

**ALARMS**

Premise Alarm \_\_\_\_\_ Yes? \_\_\_\_\_ NO? Alarm Company and Telephone Number \_\_\_\_\_

**PERSONS AUTHORIZED ON PROPERTY:** (Lawn/pet care, etc.)

Name \_\_\_\_\_ Name \_\_\_\_\_  
Name \_\_\_\_\_ Name \_\_\_\_\_

**HOUSE SITTER INFORMATION**

Name \_\_\_\_\_ Hours & Dates House Sitter will be present \_\_\_\_\_

**YES NO**

\_\_\_\_\_ \_\_\_\_\_ Rear yard locked?  
\_\_\_\_\_ \_\_\_\_\_ Mail stopped  
\_\_\_\_\_ \_\_\_\_\_ Newspaper stopped?  
\_\_\_\_\_ \_\_\_\_\_ Broken Windows or screens? Where? \_\_\_\_\_  
\_\_\_\_\_ \_\_\_\_\_ Pets in yard? What Type? \_\_\_\_\_ How Many \_\_\_\_\_

**ADDITIONAL INFORMATION:** \_\_\_\_\_  
\_\_\_\_\_

I understand that Vacation House Checks will be performed as time permits. The signature on this form releases the City of Concord Police Department of all liability for loss of property or damage occurring during this time period.

INFORMATION GIVEN BY \_\_\_\_\_ DATE \_\_\_\_\_ TIME \_\_\_\_\_

**MAIL TO: Concord Police Department, 1350 Galindo Street, Concord, CA 94520.**  
**Attn: Vacation House Check**