



# HOME SECURITY CHECK

INCIDENT NUMBER (Internal use) \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PHONE \_\_\_\_\_ LEAVING \_\_\_\_\_ RETURNING \_\_\_\_\_

WILL ANYONE BE STAYING ON THE PREMISES: \_\_\_\_\_ (If yes we do not accept the home check but can make an informational log instead.)

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

DOES ANYONE HAVE A KEY TO THE RESIDENCE: \_\_\_\_\_

HAVE LIGHTS BEEN LEFT ON? YES: \_\_\_\_\_ NO \_\_\_\_\_ TIMER? \_\_\_\_\_ ALARM? \_\_\_\_\_

ARE THERE ANY PETS LEFT AT THE PREMISES: \_\_\_\_\_

WILL ANYONE BE CHECKING ON OR HAVE ACCESS TO THE PROPERTY: yes / no

Name/Phone: \_\_\_\_\_

VEHICLES AT LOCATION: MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ LIC# \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ LIC# \_\_\_\_\_

PAPERS/MAIL BEING COLLECTED? YES \_\_\_\_\_ NO \_\_\_\_\_

OTHER RELEVANT INFORMATION

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Vacation checks will be performed as time/personnel permits. Submission of this form releases the Fairfax Police Department of all liability for loss of property or damage occurring during the time period.

The Fairfax Police Department and Town of Fairfax does not assume any liability for your residence during the specified dates. House/Vacation checks are not to be used as a substitute for security measures.

Resident Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**LOG OF HOME CHECKS ON REVERSE SIDE – SEE NEXT PAGE**

