



Vacation/House Check# \_\_\_\_\_

Name:		Address:		Phone:	
Departure Date & Time:		Destination:			
Return Date & Time:					
Emergency Phone N	lumber(s) you ca	n be contacted a	ıt:		
Cellphone:	Residence:	Business:	Hotel/Motel:	Other:	
Is anyone authorized to be inside of or working at the residence while you are away? ☐YES ☐NO If YES,					
Name:	Address:			Phone:	
Have keys/garage do	oor opener/codes	been left with a	nyone?	NO	
Name:	Address:			Phone:	
Have any animals be	een left inside the	e residence? 🗌 Y	ES □NO		
Type(s):	How many?				
Has a residential intrusion alarm been set? ☐YES ☐NO					
Have lights been left If YES, Where?	on?				
Are there motion lig If YES, Where?	hts? □YES □	NO			
Should there be in c	ars in the drivew	ay? □YES □N	10		
Make(s):	Model(s):	Plate #(s):	Color(s):		
Is there any further i	nformation that r	may be of assista	ance to officers chec	king your residence?	1
******	PLEASE NOTIFY		PARTMENT UPON Y 66-8633	OUR RETURN*******	
Signature:	Printed Name:				

Instructions: Fill out this form, print, sign, and return it to the Police Department at 992 Via Appia Way or email it to <a href="LsvIPD@LouisvilleCO.Gov">LsvIPD@LouisvilleCO.Gov</a>. A physical signature is required if you choose to email it to us.