

REQUEST FOR VACATION CHECK

Last Name _____ Phone _____

Address _____

Leaving _____ Returning _____

Key left with _____

(address) (phone)

Lights? _____ (timer?) Pets?—yes / no In / Out

Mail & Newspaper – Stopped? / Picked up?

Does anyone have permission to be in your home? _____

Their name(s) _____

(address) (phone) (vehicle)

Vehicles left outside? _____ Make _____ Color _____

Yard Care? _____ Alarm System? _____

Emergency phone # _____

Any other information _____

Please Mail Completed Form at least three days before leaving (to account for mail delivery) or drop off the completed form to:

Fircrest Police Department
302 Regents Blvd.
Fircrest, WA 98466