## STAR HARBOR POLICE DEPARTMENT HOUSE WATCH / VACATION CLOSE PATROL REQUEST

Reason for Extra Patrol Request/Comments: <u>VACATION / OUT OF TOWN</u>

Name:	Ph #
Address:	email:
24/7 phone number where you can be c	ontacted:
MAXIMUM OF TWO WEEK (14 days	s)
Beginning Date:	Ending Date:
Any Vehicle(s) left at Residence: (inclu	ide Color/LP#)
CHECK ALL THAT APPLY:	
Alarm(s) Animal(s) Inside Li	ghts On Outside Lights On Auto in garage
Alarm Company:	Phone No
Video doorbell or other outside actively	recording cameras
Names of authorized person(s) to be at	residence:
Contact Person in case of emergency:	Ph#
Any other keyholders? (names/ph.' s)	
Department to make extra patrols of my and that no promises are being made by of my residence. I understand that this and Employees, or the City of Log Cabi any harm (including injury, damage, the hold harmless these entities and employ signature further authorizes members of Enforcement Agency assisting them, to and/or investigation of persons, vehicles	transmission (email) I am requesting the Log Cabin Police residence/property. I understand that this is a courtesy only the Police Department other than to try and make extra patrols agreement in no way makes the Police Department, its Officers in and its governing body and employees, liable in any way for eft, etc.) to persons or property at this location and I agree to rees from any and all liability incurred by this request. My fithe Log Cabin Police Department and/or any other Law enter and remain on my property for the purpose of extra patrols, etc. during the listed dates. I further agree to notify the IMMEDIATELY upon my return if prior to scheduled date.
Signature of Requestor:	Date: