

## EPOA HOUSE CHECK REGISTRATION FORM

PLEASE PRINT CLEARLY

DATE: \_\_\_\_\_ ESCAPE PHONE NO.: \_\_\_\_\_

OWNER: \_\_\_\_\_ LOT #: \_\_\_\_\_

ESCAPE ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE NO: List all phone numbers to contact you while you are away (home, cell, etc.): \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

I WILL BE AWAY FROM \_\_\_\_\_ TO \_\_\_\_\_. OR  
\_\_\_\_\_ I WILL BE AWAY SPORADICALLY AND WILL BE HERE SOME WEEKENDS, AND WOULD  
LIKE MY HOUSE CHECKED WHENEVER POSSIBLE.

### LIGHTS

Do you have any automatic timers on any light inside your house? \_\_\_\_\_ If yes, what time are they  
scheduled to go on \_\_\_\_\_ and off \_\_\_\_\_?

Do you have any automatic timers on any outside lights: \_\_\_\_\_ If yes, what time are they scheduled to go  
on \_\_\_\_\_ and off \_\_\_\_\_?

### PETS

Will there be any pets in your house while you are away? \_\_\_\_\_ If yes, please list type of pet and pet's  
name. \_\_\_\_\_

Who will be entering your house to care for pet(s)? Please list name and phone number.

**THE FOLLOWING INFORMATION IS IMPORTANT IN CASE OF EMERGENCY, SUCH AS FIRE,  
BROKEN PIPES, OR BREAK-INS SO WE CAN CONTACT THE APPROPRIATE AUTHORITY OR  
AUTHORIZED PERSON OR CONTRACTOR.**

### PERSON(S) CHECKING HOUSE:

Will anyone be checking your house while you are away? \_\_\_\_\_ If so, please provide their names and phone  
numbers. \_\_\_\_\_

