

**KINGSMILL POLICE DEPARTMENT
HOUSE CHECK REQUEST**

NAME: _____ ADDRESS: _____

HOME TELEPHONE NUMBER: (_____) _____ - _____ CELLULAR TELEPHONE NUMBER: (_____) _____ - _____

DATE LEAVING: ____/____/____ APPROXIMATE TIME LEAVING: ____:____ AM / PM

DATE RETURNING: ____/____/____ APPROXIMATE TIME RETURNING: ____:____ AM / PM

CAN BE REACHED AT: TELEPHONE NUMBER(S): _____

ADDRESS: _____

EMERGENCY CONTACT: NAME: _____ TELEPHONE NUMBER: _____

ADDRESS: _____

PERSON(S) THAT MAY BE COMING TO YOUR HOUSE: _____

LIGHT(S) LEFT ON: _____

SPECIAL INSTRUCTIONS: _____

IN THE EVENT THERE IS A PROBLEM WITH MY PROPERTY AND THE POLICE ARE UNABLE TO CONTACT MYSELF OR THE ABOVE PERSON, I REQUEST THE POLICE TO TAKE APPROPRIATE ACTION AND CONTINUE TRYING TO CONTACT MYSELF OR THE ABOVE PERSON. () YES () NO

RESIDENT'S SIGNATURE: X _____ DATE: ____/____/____

OFFICER ACCEPTING FORM: _____

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