

TUXEDO PARK POLICE DEPARTMENT

1 Tuxedo Road – Tuxedo Park, NY 10987 Main: 845-351-4741 Fax: 845-351-4009 E-Mail: police@tuxedopark-ny.gov



VACANT HOUSE CHECK REQUEST

If you live in the Village of Tuxedo Park, and would like to have vacation checks performed on your residence, please complete this form and submit it to the Village of Tuxedo Park Police Department at least 72 hours prior to the desired start of the vacation check.

The duration of the vacation checks will be no more than 4 weeks but not less than 3 days. Vacation checks will be performed as time allows. Please notify the department immediately if departure or return times change.

Cell:
ored:
_ Date Returning: Time:
you are away
Color: License Plate #:
Color: License Plate #:
Color: License Plate #:
, performing work there, feeding pets, etc Type of vehicle:

Does residence have an alarm system? Yes No Is alarm system Monitored? Yes No If yes, name of alarm company:_____ Does your house have any broken doors, windows, or torn screens? Yes No Please describe Will any indoor or outdoor lights be left on? Yes No Location:____ Will any pets be in the residence? \square Yes \square No If yes, type of pet:_____ **Emergency Contact:** Name: Address: Telephone #:_____ The undersigned does hereby grant and request that the Village of Tuxedo Park Police Department visually check the property listed above, which may include access to the yard. The undersigned does hereby agree to hold harmless the Village of Tuxedo Park, its employees and agents for any claim for personal injury, loss or damage to property that may be suffered by the undersigned, through any action or lack thereof, by a representative of the Village of Tuxedo Park. Further, the undersigned understands and agrees that this is a voluntary, free service and does not create a special duty upon the Village and will be provided only as time and personnel are available and no guarantee is made nor assurance given against loss, theft or damage to premises. Home owners signature: Date: **Tuxedo Park Police Department** Received By: _____ Date Received:_____

Alarm Information

Blotter completed? Yes No