CONDON POLICE DEPARTMENT

HOUSE CHECK REQUEST

Location: _____

Resident:_____

Contact phone #_____

Date Leaving:_____Date Returning:_____

Lights ON:__OFF__ Auto Timer:Yes__No__

Location(s)_____

Water:On__Off__ Alarm:Yes___No___

Vehicles left at the residence:_____

Persons allowed to enter property:_____

In emergency, local contact:
Person:_____Phone_____

Emergency keys for the residence:_____

Date	Time	Officer	Comments

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