



COLD SPRING POLICE VACATION HOUSE CHECK FORM

Name:			
Address:			
Home Phone Number:		Cell Number:	
Destination:		Destination #:	
Start Date:		End Date:	
Newspaper Stopped:		Mail Stopped:	
Alarm Co:		Phone:	

Cars in Driveway:			
Make/Color:		License #:	
Make/Color:		License #:	

Local Emergency Contact:			
Name:		Name:	
Address:		Address:	
Phone:		Phone:	

Anyone else on the property:			

Lights Locations & Times:			

Additional Information:			
Email Address:			

Taken By / Date:			
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Please email completed forms to scollinsworth@coldspringky.gov

Disclaimer/Waiver

The vacation check does not guarantee that a burglary or other crime will not occur at the residence, and it is only intended to be a request for the officer to check the home periodically, based upon the availability of the officer. Consequently, it is recommended that you make every effort to safeguard against losses including securing of high value property, proper locking devices, alarm systems, etc.