



JERMYN POLICE DEPARTMENT

440 Jefferson Avenue
Jermyn, Pennsylvania 18433
(570) 876-1330 Fax: 570-876-0706

VACANT HOUSE CHECK FORM

**** Valid for thirty (30) days ****

Name: _____ Address: _____

Home Phone: _____ Cell Phone: _____

Date leaving: _____ Date returning: _____

Primary Emergency Contact: _____ Phone number: _____

Secondary Emergency Contact: _____ Phone number: _____

Description of house: _____

Check all applicable: Someone will be checking the property You will be away more than 30 days

Who is authorized to be on the property? Please include their license plate number and vehicle description and scheduled time on property.

Are you leaving any vehicles in the driveway? (Please describe) _____

Are you leaving any vehicles in the garage? (Please describe) _____

Are lights on timers? YES NO

Any outside lights? YES NO

Is house alarmed? YES NO

What type of system: _____

Alarm company name and phone number: _____

By signing this form you are authorizing members of the Jermyn Police Department to be present on your property and enter your residence should an emergency be discovered.

Signature: _____

<i>To be completed by Jermyn Police Department</i>	
Date & time received: _____	Disp: _____
Case number: _____	