

# LAKE DELTON POLICE DEPARTMENT

PO BOX 510, 50 WIS DELLS PKWY S, LAKE DELTON, WISCONSIN 53940

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## RESIDENCE VACATION CHECK INFORMATION

DATE LEAVING: \_\_\_\_\_ DATE RETURNING: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

### **IN CASE OF AN EMERGENCY CALL:**

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

Are there any firearms in the residence? Yes No Where are the firearms stored?

\_\_\_\_\_

Will there be lights on inside the residence? Yes No What areas?

\_\_\_\_\_

Will the lights be on a timer? Yes No Times the lights will be on:

\_\_\_\_\_

People and vehicles checking residence:

\_\_\_\_\_

\_\_\_\_\_

Any other information (alarms, motion lights, etc):

\_\_\_\_\_

\_\_\_\_\_

**\*\*It is the owner's responsibility to maintain an appearance of occupancy of the residence, i.e. removal/ stoppage of mail and newspapers, snow removal, lawn care, etc.\*\***

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_