

# ALBANY POLICE RESERVE VACATION HOME WATCH REQUEST FORM

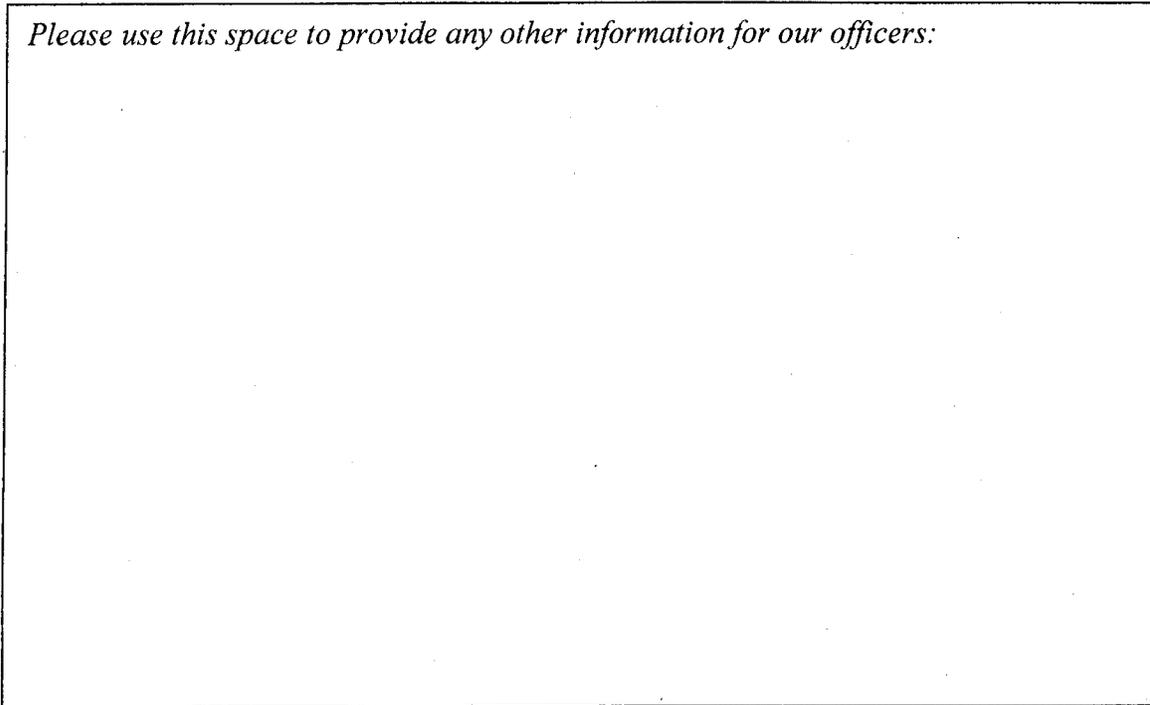
<b>LOCATION TO BE CHECKED</b>					
NUMBER AND STREET			NEAREST CROSS STREET		
<b>RESIDENT'S NAME</b>					
LAST		FIRST		MIDDLE	PHONE
<b>DATES TO BE CHECKED (30-DAYS IS THE MAXIMUM ALLOWED)</b>					
DATE/TIME DEPARTING		DATE/TIME RETURNING (REQUIRED FOR APPROVAL)			
<b>EMERGENCY CONTACT</b>					
NAME			PHONE		
<b>PETS STAYING AT THE RESIDENCE</b>					
LIST PETS OR WRITE "NONE"					
<b>SECURITY MEASURES ALREADY TAKEN</b>					
ALARM		YES <input type="checkbox"/> NO <input type="checkbox"/>		IF YES, LIST COMPANY AND PHONE	
KEY ON FILE WITH PD		YES <input type="checkbox"/> NO <input type="checkbox"/>		MAIL STOPPED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	
LIGHTS ON		YES <input type="checkbox"/> NO <input type="checkbox"/>		IF LIGHTS ON, LIST WHERE	
TIMERS YES <input type="checkbox"/> NO <input type="checkbox"/>					
PAPER STOPPED		YES <input type="checkbox"/> NO <input type="checkbox"/>			
OTHER MEASURES TAKEN					
<b>OFFICER SAFETY INFORMATION</b>					
ARE ANY FIREARMS STORED AT THIS LOCATION?			PLEASE LIST FIREARMS STORED		
YES <input type="checkbox"/> NO <input type="checkbox"/>					
SHOULD THERE BE ANY VEHICLES AT THE RESIDENCE?			IF YES, PLEASE LIST BELOW		
YES <input type="checkbox"/> NO <input type="checkbox"/>					
COLOR	YEAR	MAKE	MODEL	LICENSE	LOCATION
COLOR	YEAR	MAKE	MODEL	LICENSE	LOCATION
COLOR	YEAR	MAKE	MODEL	LICENSE	LOCATION
WILL ANYONE ELSE BE COMING BY THE RESIDENCE?					
YES <input type="checkbox"/> NO <input type="checkbox"/>					
IF YES, PLEASE LIST BELOW					
LAST NAME		FIRST NAME		PHONE	
DO THEY HAVE A KEY?		PURPOSE OF THEIR VISIT			
YES <input type="checkbox"/> NO <input type="checkbox"/>					
ARE THERE ANY BROKEN WINDOWS OR SCREENS?			LOCATION		
YES <input type="checkbox"/> NO <input type="checkbox"/>					
ARE THERE ANY POTENTIAL HAZARDS THAT WE NEED TO BE AWARE OF?			IF YES, PLEASE LIST ON BACK.		
YES <input type="checkbox"/> NO <input type="checkbox"/>					
DEPARTMENT USE ONLY		DATE RECEIVED		FORM OF ID CHECKED	
RIMS ENTRY		RECEIVED BY			

SEE REVERSE SIDE OF THIS FORM FOR MORE INFORMATION

Residents requesting the vacant home watch service should be aware that every reasonable effort will be made to inspect the vacant property during your absence. However, circumstances may not allow for checks to occur on any specific days or at all; daily property checks cannot be assured. Any community member seeking additional clarification concerning our potential inability to provide this service is encouraged to contact the On-Duty Supervisor.

**NOTE: FOR OUR OFFICER'S SAFETY, THE RESIDENCE WILL NOT QUALIFY FOR VACATION HOME CHECKS IF ANYONE WILL BE STAYING IN THE RESIDENCE DURING THE TIME OF THE CHECKS OR IF THE HOME IS VACANT DUE TO A SALE OR CONSTRUCTION.**

*Please use this space to provide any other information for our officers:*



**I UNDERSTAND THAT HOUSE CHECKS WILL BE PERFORMED AS TIME AND VOLUNTEER STAFFING PERMITS. I HOLD THE MEMBERS OF THE ALBANY POLICE DEPARTMENT AND THE CITY OF ALBANY HARMLESS AND AGREE NOT TO FILE ANY TYPE OF CLAIM DUE TO DAMAGE THAT MAY OCCUR AS A RESULT OF THIS REQUESTED SERVICE.**

**SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_