

CITY OF

CLYDE HILL CLYDE HILL POLICE DEPARTMENT

YARROW POINT RESIDENTIAL VACATION ALERT

Address: _____

Name: _____ Phone: _____

Is anyone watching the residence or have keys to the residence? YES [] NO []

Name: _____ Phone: _____

Address: _____

Will anyone be working or have access to the premises during your absence? YES [] NO []

Name(s): _____

Do you have an alarm system? YES [] NO []

If yes, please tell us the name of the company and what type of alarm you have: _____

Will there be any vehicles left outside during your absence? YES [] NO []

If yes, please tell us the make/model/color and license number of the vehicle(s) : _____

In case of emergency do you wish to be notified? YES [] NO []

C/O: _____ PHONE: _____

Signature: _____ DATE: _____

LEAVING: _____ RETURNING: _____

Upon return, would you like to be contacted by an officer? YES [] NO []

If yes, please indicate how you would like to be contacted: please circle an option below

By phone: _____ **OR** In person

NOTE: THIS IS **NOT** A FORMAL HOUSEWATCH. THE CITY OF CLYDE HILL AND THE CLYDE HILL POLICE DEPARTMENT DO NOT ACCEPT ANY RESPONSIBILITY FOR THE SECURITY OF THE RESIDENCE AND/OR ANY PROPERTY THEREON.