

VACATION NOTICE

Name	
Address	
Phone	
Email Address	
Departure Date	Return Date

House Key Left with Information

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone
Are you expecting anyone to be at the house during your absence? If Yes Explain		Yes No
Alarm System in use	Yes	No
Lights on timers Time On	Time Off	Room
Lights on timers Time On	Time Off	Room
Outside Lighting? Location		
Drapes/Blinds Open?	Yes	No
Newspaper Delivery Stopped?	Yes	No
Mail Delivery Stopped?	Yes	No
Will there be any vehicles on the Premises?		Yes No
Make/Model	Color	Location
Make/Model	Color	Location
FOR OFFICE USE ONLY:		
Report Date:	Time:	Person Taking Report: