

Piedmont Police Department

403 Highland Avenue Piedmont, CA 94611 (510) 420-3000 FAX (510) 420-1220

VACATION HOME CHECK (4 – 30 Days) Select to request physical check of home ¹	VACANT HOME NOTIFICATION Select to provide vacancy information, ONLY²
Address	Resident's Name
Date/Time Leaving	Date/Time Returning

Address		Resident's Name			
Date/Time Leaving		Date/Time Returning			
PLEASE NOTIFY PPD UPON YOUR RETURN					
Home Phone	Alternate Phone	How can we reach you while you are away?			
In Case of Emergency Please Notify:		Do they have a key? ☐YES ☐NO			
Name		Phone			
Address		City			
Newspaper/Mail Collecte	d? □YES □NO	Pet(s) on premises?			
Lights? _YES _NO _Timer Time lights on: Time lights off:					
Alarm? _YES _NO _Silent _Audible Alarm Company:					
Person(s) Authorized to b	e on premises:				
Name		Relationship/Job:			
Phone How often on premises?					
Name Relationship/Job:					
Phone	Phone How often on premises?				
Name	lame Relationship/Job:				
Phone	How often on premises?				
Other Information:					
PPD USE ONLY		Accepted by:			

PPD USE ONL	_Y		Accepted by:		
Date	Officer	Remarks	Date	Officer	Remarks
				<u> </u>	
			Cancellation Verification:		

 1 Does not guarantee the frequency of checks or the safety/security of your home during your absence. 2 No physical check desired, or vacancy is in excess of 30 days. THERE WILL BE NO PHYSICAL CHECK.