

# VACATION HOUSE CHECK

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

EMERGENCY CONTACT: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_

DATE LEAVING: \_\_\_\_\_ DATE OF RETURN: \_\_\_\_\_

**WE WILL NOT CHECK A RESIDENCE THAT HAS SOMEONE STAYING THERE.  
YOU MUST DRAW A MAP ON THE BACK OF THIS FORM SHOWING A CROSS STREET OR WE MAY  
NOT BE ABLE TO CHECK RESIDENCE.  
RESIDENCE WILL BE CHECKED FOR A MAXIMUM OF 30 DAYS.**

PETS IN YARD \_\_\_\_\_

ANY WINDOWS LEFT OPEN \_\_\_\_\_ IF SO LOCATION \_\_\_\_\_

VEHICLES IN DRIVEWAY OR GARAGE

LIC# \_\_\_\_\_ COLOR \_\_\_\_\_ MAKE \_\_\_\_\_

LIC# \_\_\_\_\_ COLOR \_\_\_\_\_ MAKE \_\_\_\_\_

GARAGE LOCKED \_\_\_\_\_ LIGHTS ON IN HOUSE \_\_\_\_\_ IF SO LOCATION \_\_\_\_\_

ANYONE ALLOWED ON PROPERTY \_\_\_\_\_

NAME(S) \_\_\_\_\_

\_\_\_\_\_