CITY OF WILLOUGHBY * POLICE DEPARTMENT * HOUSE CHECKS

Address _____ Zone _____

Name _____ Phone_____

Date _____ Time Received _____

Vacation _____ Vacant _____ Other _____

Date Leaving:_____ Date Returning: _____

Alarm Y ☐ N ☐ Alarm Company _____ Phone_____

Lights Burning Y ☐ N ☐ Location _____

Mail/Newspaper Forward _____ Stopped _____ P/U _____

Vehicles in Driveway _____ Garage _____

Description _____

_____

Keys Obtained From _____

Address _____ Phone _____

Additional Remarks _____

_____

_____

INFORMATION BELOW TO BE COMPLETED BY WILLOUGHBY POLICE DEPARTMENT

Date	Time	Officer	Date	Time	Officer