SUFFERN POLICE DEPARTMENT

HOUSE CHECK

Name:		Address						
Phone #:		Will be away from (date):		To:				
Lights On?: Y N		Timer Used?:	Fröm	T	0			
Description of House:								
Car In Driveway?: Y	N Ca	r In Garage?: Y	N .	Car Descrip:				
IN CASE OF EMERGENCY NOTIFY (Name & Tel #):								
Above Party Has Key?: Y N		Will All Deliveries be Stopped?:		Y N				
Any hazards on the property that the Police should be aware of?:								
House Request Submitted To (Officer/ Dispatcher Name):								

DATE	TIME	CHECKED BY	REMARKS				
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		6.					
			12.				
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