



Oak Creek Police Department
 301 W. Ryan Rd., Oak Creek, WI 53154
 (414) 762-8200 (dial "0" for dispatch)

VACATION WATCH CHECKLIST

HOME OWNER INFORMATION			
Name/s:		Date of Birth:	
Address:			
Phone: <input type="checkbox"/> Home <input type="checkbox"/> Cell		Alternate Phone: <input type="checkbox"/> Home <input type="checkbox"/> Cell	
Departure Date:		Return Date*:	

*NOTE: Please contact Dispatch at the number above upon return.

LIGHTS	
Will lights be on inside of the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes...	Which Room/s:
	Which Direction Does It Face:
	<input type="checkbox"/> Lights On All The Time <input type="checkbox"/> Lights on a Timer
	Time On: Time Off:

PETS	
Will there be any pet/s left inside the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes...	Type of Animal/s:
	Name/s of Animal/s:

VEHICLES			
Will there be any vehicle/s in the driveway? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, Vehicle Description	Type:	Make/Model:	
	Color:	License Plate:	

ALARM		
Is there an alarm on the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes...	Alarm Co. Name:	Phone #:
	Has Alarm Co. Been Notified of Vacation: <input type="checkbox"/> Yes <input type="checkbox"/> No	

KEYHOLDERS		
Will anyone be checking on the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes...	Name:	Phone #
	Vehicle Description:	
	Relation to Homeowner:	
Emergency Contacts:		
Name:	Phone:	Keyholder? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name:	Phone:	Keyholder? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name:	Phone:	Keyholder? <input type="checkbox"/> Yes <input type="checkbox"/> No