Rhome Police Department

Vacation House Watch Application

Date of Departure: _____ Date of Return: _____

Contact Information

Name: _____

Phone Number: _____

Address: _____

_____

Email Address: _____

Alarm Activated: ◯ Yes ◯ No Lights On: ◯ Yes ◯ No Lights on Timer: ◯ Yes ◯ No

Vehicles on Premises: ◯ Yes ◯ No If yes, please list vehicle:

Vehicle	Make	Model	License Plate Number
1			
2			
3			

Others with Access to Property? ◯ Yes ◯ No If yes, please list names of each:

	Name	Business/Company
1		
2		
3		

Emergency Contact (perferably a key holder):

Name: _____ Phone: _____

Comments: _____

_____

All vacation house watches agreements are limited to 14 days.
Complete this application and submit it to Police Department
at PDRecords@cityofrhome.com