

VACATION HOUSE CHECK FORM

NAME _____

ADDRESS _____

TELEPHONE NUMBER _____ RECEIVED BY _____

HOUSE CHECK TO BEGIN _____ DATE OF RETURN _____

RESPONSIBLE PERSON _____ TELEPHONE NUMBER _____

ADDRESS _____

_____ POOL IN YARD _____ AUTOMATIC TIMER TIME _____

_____ PETS IN YARD _____ ANYONE TO BE ON PROPERTY

_____ REAR YARD LOCKED _____ NAME _____

_____ BROKEN WINDOWS/SCREENS _____ ADDRESS _____

_____ CARS IN DRIVEWAY _____ NEWSPAPER STOPPED

_____ MAIL STOPPED

_____ DRIVE BY CHECK ONLY YES [] NO []

COMMENTS: _____
