

West Bloomfield Police Department – Residential Vacation Request

Address: \_\_\_\_\_

Section – *Quadrant* (to be completed by the Police Department) \_\_\_\_\_

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Emergency Phone/Cell: \_\_\_\_\_

**Date Leaving:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Date Returning:** \_\_\_\_/\_\_\_\_/\_\_\_\_

Alarm Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Alarm: \_\_\_\_\_

Contact Person with Keys and Alarm Code to your residence:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Lights on Timer? Yes No

Have you advised your neighbors of your plans? Yes No

Rooms with timers and approximate times of activation: \_\_\_\_\_

\_\_\_\_\_

Vehicles remaining at your residence: Yes No

License Plate Number: \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_

**Will anyone be visiting the residence to spot check or pet sit in your absence:** Yes No

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Additional Information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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This form can be provided to the Police Department by Dropping Off at the Front Desk, Mailed to the Police Department at 4530 Walnut Lake Road, P.O. Box 250188, West Bloomfield, MI 48325 or Faxed to 248-682-1811.