Incident # ☐☐ - ☐☐☐☐☐☐

HOUSE CHECK REQUEST

Requestor: _____ Phone Number: (_____) _____

Address: _____

Start Date/Time: _____ End Date/Time: _____

	Yes	No		
Will someone be looking after the house?	☐	☐	Name(s)	Phone #
Will anyone be given keys or access to the house during your absence?	☐	☐	Name(s)	Phone #
Will any lights be left on?	☐	☐	What rooms?	If on timers, when?
Will the newspaper be stopped?	☐	☐		
Will the mail be stopped?	☐	☐		
Will a vehicle or vehicles be left on the property?	☐	☐	Year/Make Year/Make	Model Model
Is a burglar alarm installed?	☐	☐	☐Silent ☐Audible ☐Visual	
If you have an alarm, how is it activated?			☐ Sound ☐Contacts ☐Light Beams ☐Other* *If other, please describe:	
Which alarm company, or who should be contacted if alarm is activated?			Name	Phone #
Is there someone local we could contact in an emergency?	☐	☐	Name	Phone #
Will there be a dog (or other animal) in the yard?	☐	☐	Describe type and any characteristics/behaviors that we should be aware of:	
Can you be reached in case of an emergency?	☐	☐	How? ☐Phone # ☐Other: Where?:	
Remarks:				

I do hereby grant and request the SeaTac Police Department to visually and physically check upon the property listed above. I understand that this free service does not create a special duty upon the City or its Police Department, and is provided only as time is available. I understand that no guarantee is made nor assurance given against loss, theft or damage to the premises or property. I agree to hold harmless the City of SeaTac, SeaTac Police Department and King County Sheriff's Office, and all their respective staff and employees for any and all claims for personal injury, loss or damage to property that may be suffered by me through any action or lack thereof by a representative of the King County Sheriff's Office.

Signed this _____day of _____, _____.

By: _____ Print name: _____

For Office Use Only:

Date Received: _____ Assigned to: _____