AUBURN POLICE DEPARTMENT VACANT HOUSE NOTIFICATION INFORMATION SHEET PH (603) 483-2134/FAX (603) 483-2013

Email: police@townofauburnnh.com

Thank you for letting us know you will be away. We encourage you to leave a key and copy of this completed form with a trusted friend or neighbor if your residence is going to be unoccupied for any significant amount of time. This should be someone who is able to immediately recognize if something looks unusual at your property. PLEASE LET THAT PERSON KNOW THAT IF THEY SEE ANYTHING SUSPICIOUS TO CALL 911 WITHOUT HESITATION.

Disclaimer: Notification will be assigned to the patrol officers. Please note they will attempt to drive through the area paying attention to any suspicious activity at the house or surrounding area.

| Name and address to be checked: | | | | |
|--------------------------------------|----------------------|----------------|---|--|
| Number Where You Can Be Reac | hed (if needed): | _ | | |
| Alarm System: Yes No N | fail Stopped: Yes_ | No Vide | eo Camera System: Yes No | |
| Lights on a timer? Yes No When: Wher | | | re: | |
| Other Information: | | | | |
| Vehicles In Driveway: Make | Model | Year | Plate # | |
| | | | Plate # | |
| Information of person checking or | n your home: | | | |
| Name: | Phone # | | Address: | |
| Person(s) To Contact In Case of E | mergency: | | | |
| Name | Address | | Phone # | |
| 1 | | | | |
| 2 | | | | |
| *NOTE: PLEASE CONTACT TH | E POLICE DEPAR | TMENT WITH | IIN 24 HOURS OF YOUR RETURN* | |
| Date Leaving: Date Returning: | | | | |
| enter your residence should an emerg | gency be discovered. | You understand | Department to be present on your property, although this program will increase the the safety of your residence or be respons | |
| Your signature: | | Date: | | |