

**NEW CUMBERLAND POLICE DEPARTMENT
VACATION HOUSE CHECK**

House Check Number:

Address:

Name:

Home Phone:

Emergency Phone:

Departure Date:

Return Date:

Lights on in home: Yes / No

Location:

Timer:

Location:

Timer: .

Vehicle(s) parked on property? Yes / No

Make: _____ Model: _____ Color: _____ Tag: _____

Make: _____ Model: _____ Color: _____ Tag: _____

Key Holder(s): _None______

Emergency Contact Person(s): _____

Emergency Contact Phone: _____

Other Information: _____

Waiver of Liability

I am requesting that a member of the New Cumberland Police Department conduct periodic checks of my residence during my absence. I understand and agree that this voluntary, free service will be provided only as time is available, and that no guarantee is made nor assurance given against loss, theft, or damage to the premises and if any such action should occur, I cannot, nor will I, hold the Borough of New Cumberland, the New Cumberland Police Department or any of its officers, employees, members or agents liable.

I understand that it is my obligation to advise the New Cumberland Police Department, as soon as reasonable possible, of my return to my residence and to cancel the house checks.

Printed Name

Signature

Date

