

RIVERSIDE POLICE DEPARTMENT
Vacation Request Check List

Fill this form out and deliver in person to the Riverside Police. Please have photo identification with you when turning in this request.

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

REASON FOR EXTRA PATROL: _____

TYPE OF PREMISES: RESIDENCE: ___ BUSINESS: ___

OTHER: _____

PROTECTED BY ALARM SYSTEM: YES ___ NO ___

TYPE OF ALARM: _____

ALARM COMPANY: _____

LIGHTS ON: YES ___ NO ___ AUTOMATIC: YES ___ NO ___

VEHICLES LEFT ON PROPERTY? YES ___ NO ___

IF YES, DESCRIBE:

KEYS LEFT WITH ANYONE: YES ___ NO ___

IF YES, NAME: _____

ADDRESS: _____

PHONE: _____

OTHER PERSONS HAVING ACCESS TO PREMISES:

IN CASE OF EMERGENCY DO YOU WANT TO BE NOTIFIED?

YES ___ NO ___ C/O NAME: _____

ADDRESS: _____ PHONE: _____

I REQUEST A SECURITY CHECK ON MY HOME FROM _____

TO _____ AND WILL NOTIFY YOU UPON MY RETURN.

SIGNED: _____ DATE: _____