

Date: _____ V-OV# _____ Sheriff Dept. Number _____

Vacation House Check Application

Name _____ Phone # _____
 Address _____ Cell # _____
 Nearest Cross Street _____
 Departure Date: _____ Return Date: _____
 Alarm: Yes _____ No _____ Gardener: Yes _____ No _____
 Vehicles on Property: Make/Color/Plate #1 _____
 Make/Color/Plate #2 _____ Make/Color/Plate #3 _____
 Have you stopped your newspaper? Yes _____ No _____
 Emergency Contact Information:
 Name _____ Phone # _____
 Address _____
 Relationship _____
 Comments _____

Vacation House Check Log

Date	Time	Check/Drive By	V#	Passenger	Comments

Vacation House Checks are available ONLY to FULL-TIME Calaveras County Residents who will be away for 3 to 30 days. Time extensions MAY be considered, upon request.