

# RICHFIELD TOWNSHIP DEPARTMENT OF PUBLIC SAFETY



## UNOCCUPIED RESIDENCE CHECK



TODAY'S DATE

PROP. CHECK #

*Office Use Only*

### OWNER'S NAME & ST HELEN INFORMATION

LAST

FIRST

MIDDLE

ADDRESS (St. Helen):

NUMBER & STREET OF RESIDENCE TO CHECK

PHONE # :

CELL # :

DATE LEAVING:

DATE RETURNING:

OUTSIDE CAMERA'S PRESENT:

YES

NO

HOUSE ALARM:

YES

NO

HOUSE LIGHTS:

LEFT ON

LEFT OFF

### ADDRESS WHERE OWNER WILL BE

ADDRESS:

CITY:

STATE :

ZIP:

PHONE # :

### KEYHOLDER INFORMATION

NAME:

ADDRESS:

PHONE # :

CELL # :

### ADDITIONAL INFORMATION (Visitors while your away, light timers, etc)