



**HILL
POLICE**

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VACANT HOUSE CHECK INFORMATION FORM

Date: _____

Resident's Name: _____

Address to be checked: _____

Date Leaving: _____ Date Returning: _____

Location of lights left on: _____

Are Lights on a Timer: Yes No

Car(s) left in Garage: Yes No

Car(s) left in Yard: Yes No

Description: _____

Does anyone have keys? Yes No

Name and number to reach person(s) with keys: _____

Person and number to call in case of emergency: _____

Anyone watering plants or feeding animals? Yes No

Name and vehicle description: _____

Anyone else checking premises? Yes No

Name and vehicle description: _____

Date in Office: _____ Received by: _____ Time: _____