



KINGSTON TOWNSHIP POLICE DEPARTMENT

180 EAST CENTER STREET, SHAVERTOWN, PA 18708-1514 ♦ (570) 696-1175



House Watch Request

Date:	
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Owner/Property Information

Name:			
Address:			
Date & Time of Departure:		Date & Time of Return:	
Destination:	Reachable? <input type="checkbox"/> Yes <input type="checkbox"/> No	Cell Phone:	

Emergency Contact Information

Name	Key Holder?	Address	Telephone
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Lighting Information

List rooms / location in or outside of the home where lights will either be left on or are on a timer or sensor. If on a timer, indicate turn on and shut off times. Please be as specific as possible.

Alarm Information

Alarm on House? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type: <input type="checkbox"/> Burglar <input type="checkbox"/> Police <input type="checkbox"/> Fire	Alarm Company	Telephone
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Newspapers/Mail Information	Newspapers Stopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	Mail Stopped? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Authorized Vehicles on Site

Make / Model	Color	Year	Tag# / State

Miscellaneous Information

Will anyone be checking / working on the property (repair people, landscapers, snow removal, cleaning people, pet sitters, etc.)? Is there any other information we should know? Broken windows? Dogs on property?

I hereby authorize the Kingston Township Police Department to enter my property to visually inspect the house exterior and take any action it deems necessary for the protection of my property during my absence. I understand and agree that this is a voluntary, free service and will not create a special duty upon Kingston Township and will be provided dependent upon weather and manpower. Further, I understand that no guarantee is made nor assurance given against loss of, theft of, or damage to my property. Finally, I agree to hold harmless Kingston Township, its employees and its agents, for any and all claims of personal injury, loss or damage to the property that may be suffered through any action or lack thereof.

Signature of Resident

Date