



# RIVERWOODS POLICE DEPARTMENT HOUSEWATCH FORM



Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Alarm System (on): YES  NO

Lights on Timers: YES  NO

Lights on Constant: YES  NO

Cars in Driveway: YES  NO

If yes please list:

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate: \_\_\_\_\_

Does anyone have a key to your home? YES  NO

If yes please list:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Additional Information (e.g. other persons that will have access to the house):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Emergency Contact(s):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_