

Hazlet Township Police Department

Residential Vacation Check Form

Name: _____

Address: _____

Phone number: _____ Cell Phone number: _____

Email: _____

Emergency Contact/Key holder #1

Name: _____ Phone No. (Home) _____

Address: _____ Phone No. (Cell) _____

City: _____ State: _____ Zip Code: _____

Emergency Contact/Key holder #2

Name: _____ Phone No. (Home) _____

Address: _____ Phone No. (Cell) _____

City: _____ State: _____ Zip Code: _____

Property Information

Alarm Company: _____ Phone No. _____

Lights: On ___ Off ___ Times: _____

Lights on/off in which rooms: _____

Exterior Lights : Motion ___ Timer ___ Off ___ On continuously ___

Pets: Yes ___ No ___ If yes what kind/how many: _____

Mail: Stopped ___ Delivered ___ Picked up by: _____

Vehicles left at residence:

Year: _____ Make: _____ Model: _____ Color: _____ Driveway___/Street___

Year: _____ Make: _____ Model: _____ Color: _____ Driveway___/Street___

Year: _____ Make: _____ Model: _____ Color: _____ Driveway___/Street___

Year: _____ Make: _____ Model: _____ Color: _____ Driveway___/Street___

Persons authorized to be on property:

Name: _____ Phone No. _____

Name: _____ Phone No. _____

Name: _____ Phone No. _____

Date of departure: _____

Date of return: _____

Additional Information: (Information which might assist officers. Ie: Broken windows/doors, missing screens, ect.)

This form can be emailed, faxed, and/or dropped off at Police Headquarters

255 Middle Rd Hazlet NJ 07730

Phone (732) 264-6565 Fax (732) 264-2708

email: policeinformation@hazletwp.org