

CITY OF GLENDALE, MISSOURI
VACATION WATCH REQUEST

DATE LEAVING _____

DATE RETURNING _____

RESIDENT NAME _____

TELEPHONE _____

ADDRESS _____

WILL LIGHTS BE ON _____

AUTOMOBILES ON DRIVEWAY _____

AUTOMOBILES IN GARAGE _____

1. _____

LICENSE PLATE NO. _____

2. _____

LICENSE PLATE NO. _____

3. _____

LICENSE PLATE NO. _____

4. _____

LICENSE PLATE NO. _____

5. _____

LICENSE PLATE NO. _____

CAN RESIDENT BE REACHED ___ YES ___ NO

TELEPHONE _____

LOCAL CONTACT #1 _____

TELEPHONE _____

ADDRESS _____

HAS KEYS TO RESIDENCE ___ YES ___ NO

LOCAL CONTACT #2 _____

TELEPHONE _____

ADDRESS _____

HAS KEYS TO RESIDENCE ___ YES ___ NO

LIST OF PEOPLE AND VEHICLES EXPECTED TO VISIT THE RESIDENCE WHILE GONE:

ALARM SYSTEM AT HOME ___ YES ___ NO

ALARM COMPANY _____

SURVEILLANCE SYSTEM ___ YES ___ NO

ALARM COMPANY PHONE _____