



Lincoln Police Department Vacation Home Check Request

PD Map# _____

Your Vacation
Departure Date: _____

PD Log# _____

Return Date: _____

Homeowner/Resident Name(s) _____

Address: _____, Lincoln. Cross Street: _____

Telephone: Home _____, Cell _____, Vacation (if known) _____

e-mail address: _____

Persons to contact in case of an emergency or problem at your home:

Name: _____ Phone/Cell Phone: _____ / _____

Name: _____ Phone/Cell Phone: _____ / _____

Name: _____ Phone/Cell Phone: _____ / _____

Key holders: Which of the Above Have Keys to Your Home? _____ / _____

Persons Authorized on Property: Name & Phone # _____ / _____

Yard/Pool Care Company & Phone # _____ / _____

Circle the Yes or No Response to the Following Questions:

Y	N	Does anyone else have keys to your home? Name & Phone _____ / _____						
Y	N	Will locked gates prevent access to front, side or back yard areas?						
Y	N	Address Visible on home?	Y	N	Lights or radio left on, or on timers?			
Y	N	Outbuildings or sheds on property?	Y	N	N/A	Outbuildings or sheds secured?		
Y	N	Newspaper stopped?	Y	N	Deliveries stopped?	Y	N	Mail Stopped?

If required, who will pick up?

Y	N	Any vehicles left on property? Describe w/license plate # _____
Y	N	Alarm installed? If so: Company Name & Phone # _____
Y	N	Pets on property? Number: _____ Breed: _____ Name(s): _____
Y	N	*Will all doors and windows be closed and locked on home and garage?

***There have been some changes to this program** so we may better serve Lincoln residents while providing for the safety of our personnel. We are unable to accept requests if the home has any of the following conditions: doors or windows are deliberately left open; temporary guests will be staying at the home; the home is "For Sale or Rent" and is unoccupied or may be shown by agents. We also need to limit the time period for our checks to **60 days per request** as this service is not intended to cover second homes vacant for extended times. Home checks are done on a random basis as time and staffing permit. We cannot guarantee that a check will be made. This program should not be used in place of prudent home security methods, systems or devices. If you change your dates of departure/return, or return early, please call our COPs office (916) 645-4081.

Resident Signature _____ Date: _____

Submit Request Form to: Lincoln Police Department
ATTN: COPs Office
770 7th Street, Lincoln, CA 95648

or FAX to: (916) 645-1106
ATTN: COPs Office

VHC Request Form – March 2013 (PREVIOUS EDITIONS OF THIS FORM CANNOT BE ACCEPTED)

Additional forms available from the Police Department, City's website at: www.ci.lincoln.ca.us

Or the Lincoln Police Department website at: www.lincolnpd.org

If you have any questions, please call our Volunteer COPs office at (916) 645-4081

Lincoln Police Department
Residential
Security Check Log

Log ID #: _____

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Check #	Date	Time	Officer(s) Completing Checks	✓ If Secure	Brief Comments in this Column
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25					

Detailed Comments:

Lincoln Police Department
Residential
Security Check Log

Log ID #: _____

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Check #	Date	Time	Officer(s) Completing Checks	✓ If Secure	Brief Comments in this Column
26					
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Detailed Comments:
