

CANTERWOOD VACATION CHECK FORM

NAME: _____

ADDRESS: _____

PHONE# _____

DATE DEPARTING: _____

RETURNING DATE: _____

EXTERIOR LIGHTING: YES OR NO

TIMERS/MOTION: YES OR NO

INTERIOR LIGHTING: YES OR NO

TIMERS/MOTION: YES OR NO

CARS OR EQUIPMENT OUTSIDE: YES OR NO

PLEASE PROVIDE DESCRIPTION OR VEHICLE(S) WITH LICENSE PLATE NUMBERS AND ANY EQUIPMENT WITH LOCATION.

RESIDENTIAL ALARM STATUS

IS RESIDENCE ALARMED: YES OR NO IF YES, IS ALARM AUDIBLE OUTSIDE: YES OR NO

COMPANY THAT MONITORS THE ALARM: _____

IS ALARM AUTO SHUT OFF: YES OR NO

CONTACT PERSON FOR THE ALARM CODES

NAME: _____

PHONE NUMBER: _____

EMERGENCY CONTACT PERSON

NAME: _____

PHONE NUMBER 1 _____

PHONE NUMBER 2 _____

DOES EMERGENCY CONTACT PERSON HAVE KEYS TO THE RESIDENCE: YES OR NO

NAME OF PERSON VISITING OR STATYING AT RESIDENCE: _____

WILL THERE BE ANYMALS LEFT IN THE HOUSE: YES OR NO

IF YES, WHO WILL BE CARING FOR THE ANIMALS: _____

PHONE NUMBER: _____

IS THE HOUSE BEEN WINTERIZED (IF APPLICABLE?) YES OR NO

I _____ AUTHORIZE SECURITY TO PICK UP/STORE ANY POST OFFICE, YARD SERVICE, ETC. NOTIFICATION AS WELL AS STORING ANY PACKAGE DELIVERED WHILE WE ARE AWAY.

I _____ AUTHORIZE SECURITY TO RESET IRRIGATION ALARM IF APPLICABLE.

SPECIAL INSTRUCTION: _____

DATE RECEIVED: _____

DATE CLEARED: _____