

| Office use only |  |  |
|-----------------|--|--|
| Date Received:  |  |  |

| VACANI   | Γ HOUSE CHECK FORM   |
|--|--|
| PROPERTY INFORMATION   |  |
| Property Owner Name:   |  |
| Address:   | Project Address: (if different)  |
| Phone #:   | Division/Lot#  |
|  |  |
| FORM DETAILS   |  |
| Departure Date:  | Return Date:   |
|  | e property? Yes $\Box$ No $\Box$ (if yes, please fill out details below) property? Yes $\Box$ No (drive by check only) $\Box$  |
| More details:  |  |
|  |  |
|  |  |
| Important Reminders:   |  |
| week.  | nsist of drive by patrol at least once daily and a walk-around the property 3 times per<br>ck doors and look for obvious signs of intrusion. We contact you if there are issues. |
| INDEMNITY & SUBMISSION   |  |
| I agree that this service is provided as a c<br>services. Birch Bay Village is not respons | courtesy and not intended to replace policing or professional security sible or liable for any property damage.  |
| SIGNATURE:   | DATE:  |
| PROPERTY CHECK LOG   |  |
|  |  |
| Date/Check Type/Patrol Personnel   |  |
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