



MaQuade Chesley
Chief of Police

VACATION CHECK REQUEST FORM

Please Print Legibly

VC#: _____

Your Sub Division's Name: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Home address: _____

Home phone #: _____ Cell phone #: _____

My, Home Phone or Cell Phone, should be called first in case of an emergency.

Date(s) of vacation check request: From- _____ To- _____

Local emergency contact person's name: _____

Phone #: _____

Will any vehicles be parked in the driveway or the front of the house? YES NO

Describe: _____

Will lights be turned on inside the house? YES NO

Does the house have an alarm system? YES NO

Will the alarm system be "armed"? YES NO

Please provide the alarm company's name and contact information below-

Company Name: _____

Contact Phone #: _____

Contact Name (if applicable): _____

Please describe any special instructions:

Vacation Checks are provided as a courtesy by the Mesquite Police Department. This service may be canceled without notice by the Chief of Police or his designee without warning. By requesting such service, the homeowner/tenant agrees to hold the City of Mesquite and/or its agents harmless from all liabilities and responsibilities. Please note a copy of a valid Driver's License or Id Card must accompany this request.

Signature

Date