



# 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? <table border="1"><tr><td>Y</td><td>N</td></tr></table> Lights or radio left on, or on timers?	Y	N		
Y	N					
Y	N	Outbuildings or sheds on property? <table border="1"><tr><td>Y</td><td>N</td><td>N/A</td></tr></table> Outbuildings or sheds secured?	Y	N	N/A	
Y	N	N/A				
Y	N	Newspaper stopped? <table border="1"><tr><td>Y</td><td>N</td></tr></table> Deliveries stopped? <table border="1"><tr><td>Y</td><td>N</td></tr></table> Mail Stopped?	Y	N	Y	N
Y	N					
Y	N					

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	<b>*Will all doors and windows be closed and locked on home and garage?</b>

**\*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 7<sup>th</sup> Street, Lincoln, CA 95648

or FAX to: (916) 645-3016  
ATTN: COPs Office

VHC Request Form – April 2009 (PREVIOUS EDITIONS OF THIS FORM CANNOT BE ACCEPTED)

Additional forms available from the Police Department, City's website at: [www.ci.lincoln.ca.us](http://www.ci.lincoln.ca.us)

Or the Lincoln Police Department website at: [www.lincolnpd.org](http://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 #: \_\_\_\_\_

Page 1 of \_\_\_\_\_

Check #	Date	Time	Officer(s) Completing Checks	✓ If Secure	Brief Comments in this Column
1					
2					
3					
4					
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25					

Detailed Comments:


Lincoln Police Department  
Residential  
Security Check Log

Log ID #: \_\_\_\_\_

Page 2 of \_\_\_\_\_

Check #	Date	Time	Officer(s) Completing Checks	✓ If Secure	Brief Comments in this Column
26					
27					
28					
29					
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Detailed Comments:
