

Odessa Police Department

Vacation Registration Form

HOMEOWNER REGISTRATION INFORMATION	
DATE LEAVING _____	DATE RETURNING _____
NAME _____	ADDRESS _____
PHONE NUMBER _____	CELL NUMBER _____
PHONE NUMBER WHERE YOU CAN BE REACHED _____	
LIGHTING	
INTERIOR <input type="checkbox"/> TIMER ON <input type="checkbox"/> CONSTANT LIGHT <input type="checkbox"/> NO LIGHTING EXTERIOR <input type="checkbox"/> TIMER ON <input type="checkbox"/> CONSTANT LIGHT <input type="checkbox"/> NO LIGHTING	
VEHICLES LEFT OUTSIDE OF RESIDENCE:	
COLOR / MAKE / MODEL _____	LICENSE PLATE _____
COLOR / MAKE / MODEL _____	LICENSE PLATE _____
COLOR / MAKE / MODEL _____	LICENSE PLATE _____
INFORMATION ABOUT YOUR HOME	
WILL ANYONE BE ENTERING YOUR HOME TO CARE FOR PETS / PLANTS / ETC.? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME _____	PHONE # _____
VEHICLE _____	LICENSE PLATE _____
NAME _____	PHONE # _____
VEHICLE _____	LICENSE PLATE _____
WE WILL NOT ACCEPT VACATION CHECK REQUESTS IF ANYONE WILL BE LIVING IN YOUR HOME WHILE YOU ARE AWAY.	
WILL ANY PETS BE LEFT OUTDOORS? <input type="checkbox"/> YES <input type="checkbox"/> NO	TYPE _____
WILL PETS BE LEFT LOOSE INDOORS? <input type="checkbox"/> YES <input type="checkbox"/> NO	TYPE _____
NAME OF ANIMALS _____	
ALARM SYSTEM: <input type="checkbox"/> YES <input type="checkbox"/> NO	
IS THERE A LOCAL KEY HOLDER/RESPONSIBLE PERSON ON THE ACCOUNT: <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME _____	PHONE # _____
VEHICLE _____	LICENSE PLATE _____
PERSON FOR POLICE TO CONTACT IN AN EMERGENCY	
NAME _____	PHONE # _____
DISCLAIMER / WAIVER: I understand that the Odessa Police Department and the Town of Odessa will not be responsible for any loss or damage sustained to my residence, outbuildings or contents of each, which may occur during my absence. I also agree to report in person to the Odessa Police Department before going home if I should return earlier than anticipated.	
Resident Signature: _____	Date: _____
OFFICE USE ONLY	
DATE RECEIVED _____	CASE # _____ OFFICER _____

USE BACK OF PAGE FOR ANY OTHER INFORMATION YOU WANT US TO KNOW

