

**CARROLL TOWNSHIP POLICE DEPARTMENT  
REQUEST FOR VACATION/SECURITY CHECK**

INCIDENT NUMBER \_\_\_\_\_  
(For police department use only)

CODE 50 NUMBER \_\_\_\_\_  
(For police department use only)

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**HOMEOWNER TO COMPLETE THIS PORTION OF THE FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Destination and phone number if known: \_\_\_\_\_

Type Premises: Residence ( ) Business ( ) Other ( ) \_\_\_\_\_

Does your property have an intrusion/burglar alarm? Yes ( ) No ( )

Will someone have a key or other access to your property while you are away? If so, please list that person or persons name, address and telephone number below.

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Would you like the person listed above to be called in the event of an emergency at your residence while you are away? Yes ( ) No ( )

Please list any vehicles, which you will be leaving at your residence while you are away to include make/model/registration number. If none, please indicate.

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Please list any locations in the residence or at your property where lights may be left on or controlled by a timer. If controlled by timer, please indicate the hours that the timer will be active. If none, please indicate this information as well.

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Date requested: \_\_\_\_\_ Property owner: \_\_\_\_\_

Please contact York County Control immediately upon your return home by dialing either 911 or 1-800-427-8347. Your information WILL NOT be broadcast to our officers over the police radio.