

# RESIDENTIAL VACATION CHECK REPORT

RESIDENT'S NAME			FOUNTAIN VALLEY STREET ADDRESS		
DEPARTURE DATE		RETURN DATE		PD use only	
HOME PHONE NUMBER		1st CELL PHONE NUMBER		2nd CELL PHONE NUMBER	
REGARDLESS OF BREED OR TEMPERMENT, CHECK "NO ACCESS" IF A DOG HAS ACCESS TO BACK YARD					
BACK YARD ACCESS FROM STREET		IS THERE A DOG ON PREMISES		DOES DOG HAVE BACK YARD ACCESS	
Left Side	No Access	Right Side	Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ALARM SYSTEM		ALARM COMPANY NAME		PHONE NUMBER	
None	Audible	Silent			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
EMERGENCY CONTACT OTHER THAN OWNER (Name, Relationship, and Phone Number)					
PERSONS AUTHORIZED ON PREMISES					
VEHICLES AUTHORIZED TO BE PARKED ON PREMISES (License Number and Make)					
IF PROPERTY IS IN GATED COMMUNITY				ACCESS CODE	
Name of major street nearest the key pad?					
Vacation Checks will not be completed if access can not be obtained.					
OTHER INFORMATION					
Request Received by			Date		Time