



Newton Police Department

973-383-2525

Property Check Request

Homeowner Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* _____ *State* _____ *ZIP Code*

Home Phone: () _____ Alternate Phone: () _____ Available

Date of Departure: _____ / _____ / _____ Date of Return: _____ / _____ / _____

Reason for Check: _____ Cad Number (PD USE ONLY): _____

Property Information

Alarm: Burglar Panic Fire None Alarm Company: _____

Lights: On Off Rooms: _____ Exterior Lights: On Motion N/A Off Timer

Year: _____ Make: _____ Model: _____ Mail: Stopped Delivered

Vehicles Parked At House Year: _____ Make: _____ Model: _____ Newspapers: Stopped Delivered

Year: _____ Make: _____ Model: _____ To be picked up by: _____

Pets at Home: No Yes *If Yes, What kind/How Many:* _____ Person(s) Authorized on Premises:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Emergency Contact / Key Holder Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* _____ *State* _____ *ZIP Code*

Primary Phone: () _____ Alternate Phone: () _____