



Andover Police Department  
 Vacation Watch  
 Security Check

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

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

Phone #: \_\_\_\_\_

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

Type of Premise:            Residence                      Business

Have keys been left with anyone?            Yes                      No

If Yes, Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Will anyone be working about or have access to these premises during your absence?

Yes                                      No

If Yes, Who and for what purpose?

\_\_\_\_\_  
 \_\_\_\_\_

In case of an emergency, do you wish to be notified?            Yes                      No

If yes, Phone # \_\_\_\_\_

Special instructions or conditions of property (i.e. dogs, timed lights, motion alarms, etc.)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I acknowledge that by executing this Security Check Form I have invited law enforcement to my property and have no expectation of privacy with respect to said property and its contents. I understand that short term vacation watches scheduled for one month or less in length will be checked once in a twenty-four-hour period for the duration of the watch. Long term vacation watches scheduled for more than one month in length but less than three months will be checked once a week for the duration of the vacation watch. If the vacation exceeds three months, the vacation watch will be removed from the program. Neither the Andover Police Department nor any law enforcement officer performing the services requested hereunder shall be liable for any claims or damages related to the failure of the Andover Police Department or any law enforcement office to perform the services requested hereunder in a reasonable manner or at all. I acknowledge that the services provided by the Andover Police Department hereunder are not a substitute for private security.

I hereby request a security check of my premises and agree to notify you of my return.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_