



LOWER FREDERICK TOWNSHIP POLICE DEPARTMENT

53 SPRING MOUNT ROAD, SCHWENKSVILLE, PA 19473

PHONE: (610) 287-4434

VACATION SECURITY CHECK REQUEST

(Please Print Neatly)

YOUR INFORMATION

Today's Date/Date of Request: _____ Your Name: _____

Your Address (Residence to be checked by police): _____

Your Date of Birth: _____ Dates You Will be Away: _____

Your Phone Number: _____ Alternate or Email Address: _____

This section is for EMERGENCY CONTACT information in the event police need to contact someone while you are away. If you would like to be contacted instead, please write "SELF" in the space below:

#1 Emergency Contact Name: _____ Phone: _____

Address: _____ Email: _____

#2 Emergency Contact Name: _____ Phone: _____

Address: _____ Email: _____

INFORMATION ABOUT YOUR HOME

Does your home have an alarm system? YES NO Will it be on while you are away? YES NO

Alarm Company: _____ Alarm Company Phone Number: _____

Will lights be left on inside the home? YES NO If yes, where: _____

Will vehicles be left in the driveway? YES NO If yes, please describe: _____

Will anyone be expected at the house while you are away? YES NO If yes, please describe: _____

Additional details or anything you would like the police to be aware of: _____

If your plans change or if you return early, please notify the Lower Frederick Township Police Department immediately so that unanticipated activity at your residence is not viewed as unauthorized or suspicious.

This form can be faxed to (610) 287-3719, scanned and emailed to staff@lowerfrederick.org, or dropped off in person to the township building or the police department.

Signature of Person Requesting Security Check

Police Report Number (To be completed by police)