VACATION CHECK REQUEST

Jefferson County Sheriff’s Office
79 Elkins Rd.
Port Hadlock, WA 98339
(360)385-3831

(Please print out this form and mail to the address listed above)

1. Is the building your primary residence?  Yes ___ No ____  (Vacation and Recreational properties are not eligible)

2. Will the resident be gone for 2 weeks or less?  Yes ___ No ____  (No snowbird trips)

3. A LOCAL emergency contact name and number (neighbor, relative, etc.)

____________________________________________________________
____________________________________________________________

4. Complete details as to where you will be, how to be contacted, alarms, visitors, etc:

____________________________________________________________
____________________________________________________________
____________________________________________________________
____________________________________________________________

5. Name of Resident: ___________________________________

Street Address: _____________________________________________

Town: ____________________________________________________

Dates of Absence from: ______________ To: _______________

I understand that the Jefferson County Sheriff’s Office assumes no liability for the security of my residence based on this request for this vacation check.

Signature: ______________________________ Date: ___________________