

**BEAVERCREEK POLICE DEPARTMENT**  
**VACATION HOUSE REGISTRATION FORM**

Date \_\_\_\_\_

Name \_\_\_\_\_ Primary phone \_\_\_\_\_

Address \_\_\_\_\_ Secondary phone \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Name \_\_\_\_\_ 1<sup>st</sup> Phone # \_\_\_\_\_ 2nd Phone # \_\_\_\_\_

Name \_\_\_\_\_ 1<sup>st</sup> Phone # \_\_\_\_\_ 2nd Phone # \_\_\_\_\_

Name \_\_\_\_\_ 1<sup>st</sup> Phone # \_\_\_\_\_ 2nd Phone # \_\_\_\_\_

Any vehicles left in the driveway? If so, please provide descriptions (make, color, license, etc.):

\_\_\_\_\_

\_\_\_\_\_

Will anyone be stopping by to pick up papers, mail, water the plants? If so, provide names:

\_\_\_\_\_

\_\_\_\_\_

Will you be leaving any lights on inside or outside? \_\_\_\_\_

Do you have a burglar alarm?      YES      NO      If yes, alarm company name \_\_\_\_\_

Do you have any service people or companies who will be at your residence? If so, when?

\_\_\_\_\_

\_\_\_\_\_

Any other information you would like to provide (i.e., animals on premises)?

\_\_\_\_\_

\_\_\_\_\_

**REQUEST FOR EXTRA PATROL BY POLICE DEPARTMENT EMPLOYEES: YES      NO**

We will automatically take your residence off our vacation house registration on the End Date listed. In the event this date changes, please contact our Communications at (937) 426-1225 so we can note the adjustment.

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Received by \_\_\_\_\_ Date \_\_\_\_\_ COPP receipt \_\_\_\_\_