



THE CITY OF SAN DIEGO
POLICE DEPARTMENT

CITIZEN'S REQUEST FORM

DATE/TIME: _____

NAME: _____ TELEPHONE: _____

ADDRESS: _____ SERVICE AREA: _____

THE ABOVE CITIZEN TELEPHONED AND REQUESTS:

OFFICER TO MAKE CONTACT ___ IN PERSON ___ BY TELEPHONE

PROVIDE INFORMATION ONLY VACATION HOUSE CHECK (see reverse*)
*(Vacation House Checks should be referred to R.S.V.P.)

COMMEND OFFICER OTHER (see below)

REGARDING:

TIME OF DAY: _____

DAY OF WEEK: _____

REQUEST ACCEPTED BY: _____ ASSIGNED TO OFFICER: _____

FOLLOW-UP COMMENTS: (Date(s) contacted, handled, etc.)

OFFICER'S SIGNATURE: _____

APPROVING SUPERVISOR: _____



VACATION HOUSE CHECK

House should not be for rent or for sale



PLEASE PRINT - BLACK INK ONLY

Occupant's Name (print only)		Phone	Service Area Thomas Guide
Address	Zip code	Community Gate Code	
Depart Date and Time	Return Date and Time		

Alarm? Y N If yes, might the alarm go off if doors are firmly checked? Y N

Name of Alarm Company _____ Phone _____

Door screens unlocked? Y N (Note: Should be left unlocked so doors can be checked)

Any windows intentionally left OPEN? Y N Where? _____

Gardener? Y N Days M T W T F S Name: _____

Gate(s) locked? Y N OK to go in back yard? Y N Dog in yard? Y N

Number of vehicles in driveway 0 1 2 3 4

Description of vehicle(s): _____

Radio left on inside house? Y N Night light? Y N

1st Emergency Contact Name _____ Home Phone _____

Address _____ Work Phone _____

Relationship _____ Has house key? _____

2nd Emergency Contact Name _____ Home Phone _____

Address _____ Work Phone _____

Relationship _____ Has house key? Y N

Name(s) (if any) other than Emergency contact(s) authorized to be in the house: _____

Authorization to move packages and papers:
Signature: _____

Comments or Special instructions: _____

Request taken	Office or Service Area	Date Taken	Control Number
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