



# **North Kingstown Police Department**

8166 Post Road, North Kingstown Rhode Island 02852

Fax 294-6830

## **Home Vacation Watch Form**

**Home Owners! Let us know when you are planning to be away from home. The officers who patrol your area will have an increased awareness of your property. Print this form. Fill it out and return to the North Kingstown Police Station by mail, by email [kgleason@northkingstown.org](mailto:kgleason@northkingstown.org), in person or fax to 294-6830.**

**We will be away from our home: Leaving: \_\_\_\_\_ Returning: \_\_\_\_\_**

**Owner's Name:** \_\_\_\_\_

**Street:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**Phone (Landline):** \_\_\_\_\_

**Phone: (Cell):** \_\_\_\_\_

**Primary Emergency Contact: (If same as above write "Same" below)**

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

**Street:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**Phone (Landline):** \_\_\_\_\_

**Phone: (Cell):** \_\_\_\_\_

**Alternate Emergency Contact:**

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

**Street:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**Phone (Landline):** \_\_\_\_\_

**Phone: (Cell):** \_\_\_\_\_

**Alarm Information:**

**Does Home have an Alarm? Yes \_\_\_\_\_ No \_\_\_\_\_**

**Type of Alarm: Police \_\_\_\_\_ Fire \_\_\_\_\_**

**Alarm Company: \_\_\_\_\_ Phone: \_\_\_\_\_**

**Comments: (any special concerns? Elderly, disabled, vicious dogs, weapons,)**

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