## HOME CHECK PROGRAM APPLICATION AND INFORMATION FORM

			TY INFORMATION			
NAME	LOCAL STREET ADDRESS (include P.O. Box #)					CITY
HOME PHONE	CELL PHONE/NUMBER WHERE YOU CAN BE REACHED					E-MAIL
DIRECTIONS FROM DOWNTOWN CUSTER						
ATE LEAVING (mm/dd/yyyy)  DATE RETURNING (mm/dd/yyyy)						
	CONTRACTOR AND ADDRESS.	CONTRACTOR STATE	ACT INFORMATION			TELEBULONE NUMBER
NAME	KEY HOLDER O YES O NO	ADDRE				TELEPHONE NUMBER
NAME	KEY HOLDER O YES O NO	ADDRE	SS			TELEPHONE NUMBER
NAME	KEY HOLDER O YES O NO	ADDRE	SS			TELEPHONE NUMBER
ALARM COMPANY	PHONE MUBER			ALARM COD	M CODE/PASSWORD	
				I		
	LIGHT	ING IN	FORMATION			
List rooms/locations in or outside of the home where specific as possible (attach a separate sheet if necess	-	e left on o	r are on a timer or sensor. If	on a timer, in	dicate tur	rn on and turn off times. Be
Specific as possible (attach a separate sheet in necess	,,					
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ΔΙΙ	THORIZED VE	HICI FS	ON SITE INFORMAT	LION		
AU*	THORIZED VE		ON SITE INFORMAT	ΓΙΟΝ	LICEN	SE PLATE NUMBER/STATE
				ΓΙΟΝ	LICEN	SE PLATE NUMBER/STATE
				<b>FION</b>	LICEN	SE PLATE NUMBER/STATE
				ΓΙΟΝ	LICEN	SE PLATE NUMBER/STATE
	COLOR		YEAR	TION	LICEN	SE PLATE NUMBER/STATE
	OTH	ER INF	YEAR  ORMATION  ers, snow plowers, cleaning p	people, etc.)? <i>i</i>	Are there	any weapons being stored on
Will anyone be checking or working on the property ( the premises? Are there detached garages, barns or	color  orth  (e.g., repair people, other buildings on to the custer of the custer of these residently and Sheriff's urance is given a Program.  Office and its repaction it deems not my property given derstand that no county Sheriff's County She	ER INF landscape the proper county Ho ces. I un Office an gainst los resentat ecessary en reaso o guaran Office ano	ORMATION  Pers, snow plowers, cleaning I  The try? Is there any other inform  The common of the comm	identify residentify residentify residentify residentify:  If and manpounty Sheriff':  If y to visually in the property during the residentify residentification residentifica	dences to program ower personal solutions of the control of the co	hat are unoccupied for an offered is voluntary and rmit. I understand and makes no representations he exterior of my absence, including but not condition or that there s, theft or damage to r personal injury, loss or