



**BRILLION POLICE DEPARTMENT
HOUSE CHECK REQUEST**

Name of Requestor: _____ Phone: _____

Address of Residence to be checked: _____

Residence Owner (if different): _____ Phone: _____

Date Leaving: _____ Date Returning: _____

PLEASE CONTACT US WHEN YOU RETURN TO VERIFY YOU ARE BACK

EMERGENCY CONTACT INFORMATION

Who shall we contact in the event that there is an issue with your residence:

Contact 1: Name: _____ Phone: _____

Address: _____

Contact 2: Name: _____ Phone: _____

Address: _____

ADDITIONAL INFORMATION

Will there be any vehicles present? Yes No Location: _____

Is the garage locked? Yes No

Will there be any lights left on inside? Yes No

What type of rooms will the lights be located? Living Room Bedroom Kitchen Hall Bath

When looking at the front of the home where is the room located? _____

Additional Information:

House checks are performed as time allows for the officers. Matters such as the number of officers on duty and call, volume/nature of incidents may affect the frequency of checks