

SYLVA POLICE DEPARTMENT

755 West Main Street
Sylva, North Carolina 28779
828-586-2916 *FAX 828-586-1716

Chief of Police
TAMMY W. HOOPER

Vacation Safety Check

Name: _____

Physical Address: _____

Mailing Address: _____

Phone Number: _____

Departure Date: _____

Return Date: _____

Key Holder Name: _____

Key holder phone number/address: _____

*Alarm: Yes _____. No _____. *Lights on: Yes _____. No _____.

*Who? _____ *Vehicle Description: _____

Other Information: _____

I request a security check be made to my home while I am away.

Homeowner:

Date of Request:

IF THE HOMEOWNER IS NOT PRESENT TO READ AND SIGN THIS DOCUMENT YOU MUST READ THE FOLLOWING DISCLAIMER TO THE HOMEOWNER IN ITS ENTIREITY AND YOU MUST CHECK THE BOX SHOWING THAT THEY HEARD AND UNDERSTOOD THE STATEMENT AND DID NOT HAVE ANY QUESTIONS.

DISCLAIMER: This document is not a contract for security services and does not promise or create warranty for any particular degree of police protection. The SPD security check program is a courtesy service only and does not create a "special relationship" with property owner for the purposes of the Public Duty Doctrine. The property owner and occupants acknowledge that the Sylva Police Department cannot prevent all crimes from occurring.

____ HOMEOWNER WAS READ THIS DISCLAIMER BY _____.

SERVICE ● PROTECTION ● DEDICATION