

**Sauk Prairie Police Department  
House or Building Check Request**

Date and Time Leaving:\_\_\_\_\_

Date and Time Returning:\_\_\_\_\_

Your Name:\_\_\_\_\_

Address of home to be checked:

\_\_\_\_\_

Your phone number:\_\_\_\_\_

Cell or other number to reach you at while you are gone:\_\_\_\_\_

Will keys be left with anyone? Yes\_\_\_\_ No\_\_\_\_

Name and phone number of Key holder:\_\_\_\_\_

Key holder address:\_\_\_\_\_

Will anyone be working or have access to property during you absence? Yes\_\_\_\_ No\_\_\_\_

If yes, then give name and phone number?\_\_\_\_\_

Will Lights be left on? Yes\_\_\_\_ No\_\_\_\_

If yes, where?\_\_\_\_\_

Write any additional information you have in the space below.

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