



BUTLER TOWNSHIP POLICE HOUSE CHECK INFORMATION



Homeowner Name _____ Incident # _____
 Address _____ Phone # _____
 Date Leaving _____ Date Returning _____
 email address _____

RESIDENCE INFORMATION

Alarm System Yes ___ No ___ Company _____
 Lights on Timers/Locations _____
 Vehicles in Driveway _____
 Miscellaneous Information _____

CONTACT INFORMATION

Name _____ Phone _____ Key / Yes ___ No ___
 Address _____ Alt. Phone _____
 Name _____ Phone _____ Key / Yes ___ No ___
 Address _____ Alt. Phone _____

HOUSE CHECK LOG

Day	Date	Time	Secure	Unsecure	BT#	Comments
Day 1						
Day 2						
Day 3						
Day 4						
Day 5						
Day 6						
Day 7						
Day 8						
Day 9						
Day 10						
Day 11						
Day 12						
Day 13						
Day 14						

Address _____ Date Returning _____

*Upon your return the house check information will be sent via email unless otherwise instructed.