



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/Location(s) _____
 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 _____



**BUTLER TOWNSHIP POLICE
HOUSE CHECK INFORMATION**

Homeowner Name _____ Incident # _____
Address _____ Phone # _____

HOUSE CHECK LOG

Week	Date	Time	Secure	Unsecure	BT#	Comments
Week 1						
Week 2						
Week 3						
Week 4						
Week 5						
Week 6						
Week 7						
Week 8						
Week 9						
Week 10						
Week 11						
Week 12						
Week 13						
Week 14						
Week 15						
Week 16						
Week 17						
Week 18						
Week 19						
Week 20						
Week 21						
Week 22						

Address _____ Date Returning _____