

**Davis Police Department**  
**2600 Fifth Street**  
**Davis, CA 95616**  
**Vacation House Check Program**

The Davis Police Department Volunteers in Police Service (VIPS) are pleased to offer the citizens of Davis a "Vacation House Check Program".

An authorization form is available on-line (below) or at the Police Department, 2600 Fifth Street. Authorization forms must be delivered to the Police Department and signed in the presence of Department personnel. We request, when possible, a three day notice of your departure. VIPS Program: Volunteer Coordinator; 530 747-5419.

Once your application is received, it will be forwarded to the Volunteer Coordinator and your house will be checked by VIPS on random days and times to make sure that it is secure. We will report anything suspicious and notify you or the person designated as your emergency contact.

The VIPS will not enter a yard that contains a pet. VIPS will not feed pets, water lawns/gardens, or collect mail, newspapers, etc.

As an officer safety issue, if you keep firearms in your home, please list this information in the "Additional Information" section of the application.

**Before you leave home:**

Crime Prevention while on vacation begins with making sure your home is protected while you're away. The key is to make your home look like you never left.

- Keep shades and blinds closed on lower floors, leave them in their normal positions on upper levels.
- Stop Mail and Newspapers, or ask a trusted neighbor to pick them up every day.
- Put timers on several house-hold lights so they turn on and off at appropriate times.
- Activate your Home Alarm (if you have one).
- Make sure all your door(s) and window(s) locks are in working order-and use them.
- Leave a radio on low, or put on a timer.
- Turn off the ringer on your phone and turn down the volume on your answering machine.
- Allow a trusted neighbor to park in your drive-way.

For additional crime prevention tips contact the Crime Prevention Specialist Scott Poesy 530-747-5435.

**Davis Police Department  
2600 Fifth Street  
Davis, CA 95618  
Vacation House Check Request**

NOTE: THIS FORM MUST BE BROUGHT TO THE DAVIS POLICE DEPARTMENT AND SIGNED IN THE PRESENCE OF DEPARTMENT PERSONNEL

**DATE OF REQUEST:** \_\_\_\_\_

**Print Name(s)** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Residence Address:** \_\_\_\_\_

**Map/Page #:** \_\_\_\_\_ *(Police dept use only)*

**Date & time when house will be vacant** \_\_\_\_\_

**Date & time that you plan on returning home** \_\_\_\_\_

**Location and phone where you are staying** \_\_\_\_\_

**The following person(s) are authorized to enter the property, or in case of emergency contact:**

**1. NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**OR**

**2. NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**Does the above named party(s) have a key to the property: YES NO**

**Type of Dwelling: Single Family Residence / Duplex / Condominium**

**Describe vehicles or property left outdoors while on vacation:**

1. Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Yr \_\_\_\_\_ Lic# \_\_\_\_\_ State \_\_\_\_\_

2. Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Yr \_\_\_\_\_ Lic# \_\_\_\_\_ State \_\_\_\_\_

**Other Property or additional information:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned does hereby grant and request the City of Davis and the Police Department to visually check upon the property listed above. The undersigned does hereby agree to hold harmless the City of Davis; it's employees, and agents for any claim for personal injury, loss or damage to property that may be suffered by the undersigned, through any action or lack thereof, by a representative of the city of Davis. Further, the undersigned understands and agrees that this is a voluntary, free service and does not create a special duty upon the city, will be provided only as time or volunteer personnel is available, and no guarantee is made nor assurance given against loss, theft, or damage to premises.

**SIGNED THIS** \_\_\_\_\_ **DAY OF** \_\_\_\_\_ **20** \_\_\_\_\_

**BY:** \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

Identification of person making request verified by: \_\_\_\_\_

\*Original to be routed to Volunteer Coordinator \*Copy to be filed with Dispatch

For more information on this program contact:

Volunteer Coordinator at 530 747-5400

**Alarm Information**

Do you have an alarm system? YES NO Name and phone for alarm company \_\_\_\_\_

**Property Information**

1. Do you have any broken doors or windows? YES NO If so, location \_\_\_\_\_

2. Do you have any torn screens? YES NO If so, location \_\_\_\_\_

3. Do you have timers on any indoor/outdoor lights? YES NO If so, where are they located and when do they turn on or off? \_\_\_\_\_

4. Will you stop your mail & newspaper delivery? YES NO If not, is someone collecting them for you? YES NO If yes, Name: \_\_\_\_\_ Phone: \_\_\_\_\_

5. Do you want your backyard checked? YES NO (Locked gates will not be opened)

6. When are your sprinklers timed to turn on and off? \_\_\_\_\_

7. Are pets in the house or yard? YES NO If so, type of pet and person caring for them?

Type of pet: Contact: Phone: \_\_\_\_\_

**Police use only:**

Checked by: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Checked by: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Checked by: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Checked by: \_\_\_\_\_

Date/Time: \_\_\_\_\_