Muttontown & Upper Brookville Police Department

VACANT PREMISE REPORT

Name: _____

Home Address: _____

Away Address: _____
_____

Telephone: (1) _____ **(2)** _____

Dates/Times Away: ___/___/___ ___am/pm **to** ___/___/___ ___am/pm

Alarm: YES/NO **Armed:** YES/NO **Lights:** On/Off **Timer:** Yes/No

Vehicles Remaining or Authorized at Premise:

(1)Make:
Model:
Color:

(2)Make:
Model:
Color:

Persons with Access to Premise:

Name Phone Reason for Access

_____

_____

Emergency Contacts:

Name Phone Relationship Has Key?

_____

_____

Premise Checked

Date	Time	Officer	Remarks