



Klickitat County Sheriff

509 773-4455

BOB SONGER

205 S Columbus Rm. 108, Goldendale, WA 98620

VACATION CHECK REQUEST FORM

Please Print Legibly

Last Name: _____ First Name: _____ Middle Initial: _____

Home address: _____

Home Phone#: _____ Cell Phone#: _____

My, Home Phone or Cell Phone, should be called first in case of an emergency.

Date(s) of vacation check request: From- _____ To- _____

Local emergency contact person's name: _____

Phone #: _____

Will any vehicles be parked in the driveway or the front of the house? Yes No

Describe: _____

Will lights be turned on inside the house? Yes No

Does the house have an alarm system? Yes No

Will the alarm be "armed"? Yes No

Please provide the alarm company's name and contact information below-

Company Name: _____

Contact Phone#: _____

Contact Name(if applicable): _____

Please describe any special instructions:

Vacation Checks are provided by the Klickitat County Sheriff's Posse. This service may be cancelled without notice by the Sheriff or his designee without warning. By requesting such a service, the homeowner/tenant agrees to hold the County of Klickitat and/or its agents harmless from all liabilities and responsibilities.

Signature

Date