



VACANT HOUSE CHECKS

The Lebanon Police Department provides as a service Vacant House Checks to residents of the City of Lebanon. Vacant House Checks are conducted for the purpose of protection of property, deterrence of crime, and early detection of crime. Vacant House Checks will be conducted during the absence of occupants/owners upon request. All requests should be made through the Police Department Dispatch Center.

A Vacant House is any inhabited dwelling in which the occupants/owner will leave temporarily unoccupied for no less than 24 hours and no more than 3 weeks.

The resident requesting the Vacant House Check should completely fill out a Vacant House Checks form and submit the form to the Police Department Dispatch Center for processing. It is extremely important that the dates be recorded when the house will be vacant. The owner/occupant shall be required to notify the Police Department Dispatch Center upon their return to the residence and to provide emergency contact information prior to their departure.

Once a request is received and the house is vacated a Patrol Zone Officer responsible for the area in which the house is located will be assigned the Vacant House Check. Officers with house check assignments will ensure that the property is checked at least once during each consecutive 24-hour period. To ensure that an effective check of the premises is conducted, officers will exit patrol vehicles and physically check the exterior of the premises. The officer will also ensure that the resident has returned and the house is no longer vacant within the allotted time before discontinuing the service.

This form may be downloaded to your computer and information typed in most fields. To submit this application you may either 'Print' it and bring it to the Police Station or perform a 'Save As' and then send the document in an e-mail to pjrogers@lebanonmo.org as an attachment.



LEBANON POLICE DEPARTMENT

Vacant House Checks

For LPD Use Only		
Date Received:		
Time Received:		
Received By:		
How Received:	In Person	Fax
	Mail	E-Mail

Vacant House Checks are good for 3 weeks only. Additional time will require additional forms.

Owner Information

Name of Owner / Renter / Manager:

Address:

Date Leaving: _____ Date Returning: _____

Emergency Contact Information

In case of an emergency, we will attempt to contact the persons you list below. An emergency contact should be someone who can respond to the home, day or night, with a key and/or access to the alarm system if needed. Please provide the name and phone number of two contacts.

Name	Day Phone	Evening Phone

Location Information

Will lights be left on?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what room(s)?	
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Will a dog be left at home?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, where will it be kept?	
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Will anyone be entering or working around the residence while you are gone?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes please enter their name and purpose for being on the premises below.
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Name	Purpose

Do you have an alarm at your residence?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes please enter the alarm company and phone number below.
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Company	Phone Number

Vehicle Information

Information on any vehicles left at premises

License Plate	Make	Model	Color	Location

Printed Name: _____

Signature: _____