



Return Completed Form at least ONE week prior to departure

Email to [police@twp.patton.pa.us](mailto:police@twp.patton.pa.us)

Fax to 814-238-7790

Mail to Patton Township

100 Patton Plaza

State College, PA 16803

814-234-0271

### VACATION HOME PROTECTION SERVICE

District \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

**Resident's Information:**

**Emergency Contact Information:**

Name \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

(day) \_\_\_\_\_ (eve) \_\_\_\_\_

Date of departure \_\_\_\_\_ Date of Return \_\_\_\_\_

Key holder Yes  No

Number to be reached while away: \_\_\_\_\_

Lights on timers? Yes  No  Where? \_\_\_\_\_

Mail/Paper stopped? Yes  No  Being picked up?

Vehicles left behind? \_\_\_\_\_

Someone to mow/shovel? Yes  No

Anyone in/out? Yes  No  If yes, who? \_\_\_\_\_

Anything else? \_\_\_\_\_

DATE	TIME	CONDITION	OFCR.