



VILLAGE OF WESTFIELD CENTER

Dave Pries, Chief of Police

RESIDENTIAL VACATION WATCH

NAME: _____

EMAIL: _____

ADDRESS: _____

TELEPHONE NUMBER(S): _____

VACATION ADDRESS: _____

WHILE ON VACATION, THE HOUSE WILL BE ATTENDED BY: _____

RESIDENCE EXTERIOR/VEHICLES/ETC.: _____

DATE LEAVING: _____ DATE RETURNING: _____

SUPPLEMENTAL COMMENTS FROM OWNER: _____
