SOUTHWEST GROUP PROTECTIVE SERVICES
NORTHWOOD HILLS OUT-OF-TOWN SERVICE REQUEST

(circle one)

Physical check of home and property

Drive-by check only

***Address*_____ *Request Date*_____**

***Resident's Name(s)* _____ _____**

Cell Phone #(s) _____ _____

Leaving Date:* _____*A.M. / P.M. ***Return Date:* _____*A.M. / P.M.***

Emergency Contacts

Name Relation Phone # Access to House?

_____

_____

Vehicles -- List any vehicles to be left outside the garage and where they will be parked:

Year___Make/Model_____Color_____LicensePlate_____Location_____

Year___Make/Model_____Color_____LicensePlate_____Location_____

Year___Make/Model_____Color_____LicensePlate_____Location_____

Special Instructions

	YES	NO		YES	NO
Security Alarm ON?	☐	☐	**Back gate locked?**	☐	☐
Mail stopped?	☐	☐	**Newspaper stopped?**	☐	☐
Lights on timers?	☐	☐	**Pool service?**	☐	☐
Lawn service?	☐	☐	**Pets (inside?/outside?)**	☐	☐
Is our patrol listed as a contact for your alarm company?				☐	☐

***List any additional instructions, pet descriptions or other info you want us to know*:**

_____

_____

_____

DATE	TIME	OFFICER	DATE	TIME	OFFICER	DATE	TIME	OFFICER