

TOWN OF WASHINGTON, NH
Police and Fire Departments

Notification of: ☐ Security Alarm ☐ Fire Alarm ☐ Vacant House Check Request (VHC)

Date of Request: _____ Dates Away: _____

Name: _____

Washington Address: _____

Home Address (if different) _____

Washington Phone: _____ Cell Phone: _____

Home Phone: _____ email: _____

Key Holder Name: _____ Phone: _____

Alternate Contact 1: Name: _____ Phone: _____

Alternate Contact 2: Name: _____ Phone: _____

Alarm Information

Alarm Company Name: _____ Phone: _____

Central Monitoring Company: _____ 24 hr Phone: _____

Additional Information

- ☐ Will the driveway be plowed? _____ ☐ Will the lights be on a timer? _____
☐ Will the heat be on? _____ ☐ Have you stopped the US Mail delivery? _____
☐ Are your pets on the premises? _____ ☐ Do they have a Caretaker? _____ (see above)
☐ Do any of the residents have a medical condition that we should be aware of? _____
please explain the condition: _____

Other information:

For homeowners who have requested a VHC; *please* call 495-3294 to notify us of your return home. *Thank You.*

LAE Residents Only-

Please check the box if you want this information shared with the LAE Neighbor Watch Supervisor ☐

Please fax form back to the Police Department at 603-495-1320, mail to 5 Halfmoon Pond Rd., Washington 03280 or scan and e-mail to police@washingtongnh.org.