

TOWN OF CHAPLIN
Patrol Check Form

REQUESTED BY:

NAME: _____

ADDRESS: _____

TELEPHONE #: _____

HOUSE DESCRIPTION: _____

REASON FOR PATROL CHECK, CIRCLE ONE:

Vacation

Vacant House

Problems

Other

WHEN WOULD YOU LIKE THE CHECKS TO BEGIN AND END: _____

IF REASON IS PROBLEMS, PLEASE EXPLAIN: _____

HOUSE HAS ALARM? YES NO

ALARM COMPANY NAME AND TELEPHONE #: _____

LIGHTS ON TIMERS? YES NO

DOGS ON PROPERTY? YES NO

LIST VEHICLES ON PROPERTY: _____

CONTACT PERSON / KEY HOLDER (PERSON WATCHING PROPERTY):

NAME: _____

TELEPHONE #: _____

TELEPHONE # WHERE YOU CAN BE REACHED IN CASE OF EMERGENCY ONLY: _____

**ALL FORMS SHOULD BE DROPPED OFF OR MAILED TO THE CHAPLIN TOWN HALL, 495 PHOENIXVILLE ROAD,
CHAPLIN CT 06235**

This service is provided free of charge. The patrol checks are conducted whenever possible. This service does not guarantee that no damage and/or problems will occur to your property during the time frame requested. If there are any questions or problems feel free to contact me at 860-455-2069.

TFC -

Paul F. Black #795