



HOPATCONG POLICE DEPARTMENT
 111 RIVER STYX ROAD HOPATCONG, NJ 07843
 HEADQUARTERS: 973-398-5000
www.hopatcongpolice.org



House Watch Program Request Form

Date: _____

Owner/Property Information						
Name						
Address						
Home Telephone				Cell Telephone	Reachable? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of Departure	<input type="checkbox"/> am <input type="checkbox"/> pm	Date of Return	<input type="checkbox"/> am <input type="checkbox"/> pm	Destination	Phone (if known)	
Emergency Contact Information						
Name/Keyholder			Address		Telephone	
Lighting Information						
List rooms/locations in or outside of the home where lights will either be left on or are on a timer or sensor. If on a timer, indicate turn on and shut off times. Please be as specific as possible. (attach a separate sheet if necessary)						
Alarm Information						
Alarm on House? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Burglar <input type="checkbox"/> Panic <input type="checkbox"/> Fire		Alarm Company	Telephone	
Newspapers/Mail Information			Papers Stopped? <input type="checkbox"/> Yes <input type="checkbox"/> No		Mail Stopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Authorized Vehicles on Site						
Make		Color		Year	Tag # / State	
Miscellaneous Information						
Will anyone be checking/working on the property (repair people, landscapers, snowplowers, cleaning people, pet sitters, etc.)? Is there any other information we should know? Broken windows? Dogs on property? (attach a separate sheet if necessary)						

I hereby authorize the Hopatcong Police Department to enter my property to visually inspect the house exterior and take any action it deems necessary for the protection of my property during my absence. I understand and agree that this is a voluntary, free service and does not create a special duty upon the Borough and will be provided depending upon weather and manpower. Further, I understand that no guarantee is made nor assurance given against loss, theft or damage to the property. The undersigned agrees to hold harmless the township, its employees and agents for any and all claims for personal injury, loss or damage to the property that may be suffered through any action or lack thereof by a representative of the police department.

Signature of Resident

Date