



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
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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) _____
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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 tum 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 _____
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Newspapers/Mail Information	Papers Stopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	Mail Stopped? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Authorized Vehicles on Site

Make	Color	Year	Tag # / State

Miscellaneous Information

Will anyone be checking/working on the property (repair people, landscapers, snowblowers, 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