

VACATION / SECURITY WATCH

NAME: _____

ADDRESS: _____

SUBDIVISION: _____

DATE LEAVING: _____ DATE RETURNING: _____

SPECIAL PRECAUTIONS: _____

(Lights, Alarm, etc)

PERSON WITH KEY: _____

THEIR ADDRESS/PHONE: _____

VEHICLES IN DRIVEWAY: _____

(Year, Make, Model, Color, License, etc.)

EMERGENCY NOTIFICATION: _____

(Name, Address, Phone, etc)

Mail to or drop off at the:

**HARRIS COUNTY SHERIFF'S DEPARTMENT
ATTN: VACATION WATCH
6831 CYPRESSWOOD DR.
SPRING, TEXAS 77379**

Can be faxed to: (281) 376-6153

One of these options should be done at least two weeks before you leave.