

PHIL CAMUS
HARRIS COUNTY CONSTABLE'S OFFICE
PRECINCT FIVE

VACATION WATCH

PLEASE PRINT OR TYPE ALL INFORMATION

SUBDIVISION: _____ ADDRESS: _____

NAME: _____ TELEPHONE: _____

DATE LEAVING: _____ A.M. P.M. DATE RETURNING _____ A.M. P.M.

VEHICLES:

COLORYEAR MAKE/MODEL LICENSE NO. LOCATION:

_____ DRIVEWAY GARAGE
 _____ DRIVEWAY GARAGE
 _____ DRIVEWAY GARAGE

LIGHTS LEFT ON: Yes No TIMERS ON LIGHTS: Yes No

IF YES ON TIMERS GIVE ROOM LOCATIONS: _____

ALARM: Yes No PETS: Yes No LOCATION: _____

VISITORS: TELEPHONE:

<u>NAME</u>	<u>ADDRESS</u>	<u>WORK</u>	<u>HOME</u>

IN CASE OF EMERGENCY PLEASE CONTACT: TELEPHONE:

<u>NAME</u>	<u>ADDRESS</u>	<u>WORK</u>	<u>HOME</u>

COMMENTS: _____

PLEASE MAIL COMPLETED FORM TO:
 PLEASE MAIL SEVEN (7) DAYS
 PRIOR TO DEPARTURE DATE.

HARRIS COUNTY CONSTABLE PRECINCT FIVE
 17423 KATY FREEWAY
 HOUSTON, TEXAS 77094
 OR FAX TO: 492-3540