

TOWN OF SOMERSET
VACATION HOUSE CHECK FORM

Name: _____ Date: _____

Phone: _____ () Home () Cell

Address: _____

Emergency or local call out: _____

Phone: _____ () Home () Cell

Dates watched: _____ through _____

Keys Available: Y N - With whom: _____ Telephone _____

Animals: Y N Cars in Driveway – Model _____ Plate _____

Model _____ Plate _____

Model _____ Plate _____

Lights on Timer: Y N - If so, where _____

People with Permission to be on Premise - _____ Vehicle _____

_____ Vehicle _____

I, _____, consent and allow **Police Constables of the Somerset Police Department** to trespass and examine my property during the above stated dates.

I request the officers to make entry into my home for investigative purposes only in the event that they develop credible information or evidence the home or its attachments have been compromised in any way during my absence and I request that I be notified prior to such entry. I further consent and allow the Niagara County Sheriff's Office to be present as well in the event that the investigation is referred to this agency for assistance with crime scene identification.

This voluntary consent may be revoked by the under signed either by written or verbal communication at any time or shall revoke at 23:59:59 hours on the last date listed above.

Signature of responsible party

Date