White Cloud Police Department

Home Checks

We would like this information so we may watch over your property while you are on vacation. Please complete the form and return it to the White Cloud Police Department.

Address to be checked _____

We will leave for vacation on _____

We expect to return on _____

In case of emergency please contact:
Name _____ Phone # _____
Name _____ Phone # _____

Please list any lights and or timers you may use and any other security measures _____
_____

Owners Information:
Name _____
Address _____ State _____
Phone # _____

Date & Officer _____
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