## SURFSIDE POLICE DEPARTMENT

9293 HARDING AVENUE, SURFSIDE FL 33154 305.861.4862

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## **WATCH ORDER REQUEST**

RESIDENT OWNER/TENANT'S NAME:					DATE:			
PHONE:		SEC	ONDARY I	PHONE:				
AWAY ADDRESS:								
LEAVING:						AT	HRS	
WATCH ORDER ST	TREET ADD	DRESS: _						
LOCAL KEYHOLDE								
WILL ANYONE BE	WORKING	OR CHEC	KING ON	THE PROPI	ERTY?	YES	NO	
IF YES, WHO	0?							
VEHICLE AT THE H								
MAKE:			COLOR			_		
ADDITIONAL VEHIC								
MAKE:			COLOR			_		
ALARM ON HOME?							NO	
ANY LIGHTS LEFT	ON? YI	ES N	NO L	IGHTS ON	TIMERS?	YES	NO	
PETS ON PREMISE	ES? YI	ES N	NO I	NSIDE	OUTSIDE	<u> </u>		
DESCRIPTION	ON OF PET	(S) ON PI	REMISES:					
IS THE PRO								
FENCE GAT	ES LOCKE	:D? `	YES N	IO				
ANY OTHER PEOP	LE ON THE	PROPER	RTY DURIN	G YOUR A	BSENCE? L	IST BELO	W:	
ANY ADDITIONAL I	INFORMAT	ION ABOL	JT YOUR F	ROPERTY	? LIST BELO	DW:		
F THERE IS ANY CHANGE IN YOUR The undersigned resident owner/ to		•		**				
perform any security functions for special duty upon the Surfside	or the undersigned.	Further, the und	dersigned understar	ds and agrees tha	t this a voluntary, fre	ee service and do	es not create	
nor assurance given against lo injury, death, or damage to any pe Resident Owner/Tenant, or by an	oss, theft, or dama erson or property suf	age to premises fered or sustained	s. The Town of Surfsi d by a Resident Ow	de and Surfside Polic ner/Tenant, or by ar	ce Department shall no ny representative, emp	t be liable or respondance. loyee, agent, visito	nsible for any lo or or invitee of t	
representatives, employees, agents that it is the current or existing owner.						lent Owner/Tenant	hereby represe	
RESIDENT OWNER/ TENANT'S N.	AME (PRINT):			SIGNATURE:		DATE	:	
THIS S	ECTION TO	D BE COM	IPLETED B	Y THE POI	ICE DEPAR	RTMENT		
ID VERIFIED BY: _ DATE REQUEST R								