CASE # C _____

SHERIFF
KING COUNTY

House Check Request

Date Received: _____ Time Received: _____ Precinct: _____ District: _____

Requestor: _____ Phone # : (____) _____ Email address: _____

Address: _____

Start Date/Time: _____ End Date/Time: _____

	Yes	No		
Will someone be looking after the house?	☐	☐	Name	Phone #
Will anyone be given keys or access to house during your absence?	☐	☐	Name	Phone #
Will any lights be left on?	☐	☐	What rooms?	If on timers, when?
Paper and mail stopped?	☐	☐		
Will any vehicles be left on property?	☐	☐	Year/Make/Model	License Plate
			Year/Make/Model	License Plate
Is a burglar alarm installed?	☐	☐	☐ Silent ☐ Audible	☐ Visual
How is it activated?			☐ Sound ☐ Contacts ☐ Light Beams	☐ Other
Which alarm company, or who should be contacted if alarm is activated?			Name	Phone #
Is there someone local we could contact in an emergency?	☐	☐	Name	Phone #
Can you be reached in case of an emergency?	☐	☐	How/where?	
Remarks:				

I do hereby grant and request the King County Sheriff's Office to visually and physically check upon the property listed above. I understand that this free service does not create a special duty upon the County or its Sheriff's Office and is provided only as time is available. I understand that no guarantee is made, nor assurance given against loss, theft or damage to the premises or property. I agree to hold harmless King County, the King County Sheriff's Office, and all their respective staff and employees for any and all claims for personal injury, loss or damage to property, that may be suffered by me through any action or lack thereof by a representative of the King County Sheriff's Office.

Signed this _____ day of _____, _____.

_____ _____
Signature Print Name

Language Assistance: Free translation and interpretation services are available. To request these services, please inform the staff assisting you.

Request Received by:	
Name	PeopleSoft # :