



Edwardsville Police Department
VACATION EXTRA PATROL REQUEST



Date Leaving:

Date Returning:

Resident Name(s):

Address:

Contact Number(s):

Email Address:

Will there be lights left on? Yes No

Describe locations/timers/etc:

Will anyone have access to the house? Yes No

If yes, please explain:

Additional house details/notes:

Will there be any vehicles left at the house? Yes No

Vehicle 1 - Make/Model: Color: License Plate: Location:

Vehicle 2 - Make/Model: Color: License Plate: Location:

Vehicle 3 - Make/Model: Color: License Plate: Location:

Emergency Contact Info:

Name(s):

Contact Number(s):

Email:

Name(s):

Contact Number(s):

Email:

Please contact us at 618-656-2131 to let us know you have returned.