TOWN OF EAST TROY POLICE DEPARTMENT
N9330 Stewart School Road
East Troy WI 53120
Police Dept. Non-Emergency 262-642-3700
Fax 262-642-9701
www.townofeasttroywi.gov

HOUSE WATCH REQUEST FORM

Please complete the following information so the Police Department can properly document your request and follow up if necessary.

RESIDENT / REQUESTOR INFORMATION

Full Name: _____
Date of Birth: _____
Property Address: _____
Phone Number: _____
Email Address: _____

VACATION HOUSE WATCH INFORMATION

Dates You Will Be Away:
Departure Date: _____ Time: _____ Return Date: _____ Time: _____
Will any work be performed at the property while you are away?
☐ Yes ☐ No
If yes, please provide details, including the type of work and expected dates:

_____

_____

PETS / ANIMALS AT THE PROPERTY

Will any pets or animals be at the property while you are away?
☐ Yes ☐ No
If yes, please provide the following information:
Type of Animal(s): _____
Number of Pets: _____
Pet Names: _____
Will anyone be caring for or checking on the animals?
☐ Yes ☐ No
If yes:
Caregiver's Name: _____
Contact Number: _____
Additional Information / Special Instructions:

_____

_____

LIGHTING INFORMATION

Interior Lighting

Please identify interior locations where lights will be left on and indicate the setting.

Location	Continuous On	Timer
_____	☐	☐
_____	☐	☐
_____	☐	☐

Exterior Lighting

Please identify exterior locations and indicate the setting.

Location	Continuous On	Timer	Dusk to Dawn
_____	☐	☐	☐
_____	☐	☐	☐
_____	☐	☐	☐

ADDITIONAL PROPERTY INFORMATION

Will anyone else be checking on the property while you are away?

☐ Yes ☐ No

If yes, please provide their name and contact information:

Name: _____

Phone: _____

Who has keys or access to the property, if anyone?

Name: _____

Contact Information: _____

Door / Garage Access Code (Optional but Encouraged)

For security purposes, please do not write access codes on this form. If you have a door or garage access code that may be helpful to officers in an emergency, please call the Police Department directly to provide that information.

ADDITIONAL INFORMATION / SPECIAL INSTRUCTIONS

Please provide any additional information that may be helpful to the Police Department:

_____

_____

_____

ACKNOWLEDGMENT: I understand that property checks are provided as a courtesy and are subject to officer availability and departmental responsibilities. The Town of East Troy Police Department will make reasonable efforts to accommodate this request but cannot guarantee checks or prevent incidents from occurring.

Resident Signature: _____ Date: _____

HOW TO SUBMIT YOUR COMPLETED FORM

Completed forms may be submitted using any of the following methods:

- In Person: Drop off at the Town of East Troy Town Hall.
- By Mail:
  Town of East Troy Police Department
  N9330 Stewart School Road
  East Troy, WI 53120
- By Email: tetpd@townofeasttroywi.gov

POLICE DEPARTMENT USE ONLY

Date Received: _____ Time: _____

Received By: _____

Notes / Follow-Up:

_____

_____

_____