



**WALLENPAUPACK LAKE ESTATES
SAFETY PATROL HOUSE WATCH FORM**
Must update every time you leave for extended period

I request that a security check be made on my premises from _____ to _____

Location: Sec _____ Lot _____ New House # _____ Street Name _____

Phone: _____ Cell: _____

Request made by: _____ Property Owner: Yes _____ No _____

If no, relation: _____

Reason for extra patrol: Snowbird - Vacation - Other _____

Protected by alarm system: Yes _____ No _____

If yes, what type of alarm? _____

Lights on: Yes _____ No _____ Location in residence: _____

Lights on timer? Yes _____ No _____ If yes, time scheduled: _____

Motion Detector Lights? Yes _____ No _____ Location at residence: _____

Keys left with anyone: Yes _____ No _____ Name of person: _____

Address: _____ Phone: _____

Keys left in WLE Office Property Owners File? Yes _____ No _____

Other persons with access to premises (circle all that apply): Relative - Neighbor - Worker - Other

Name: _____ Address: _____

Phone: _____ Reason: _____

In case of an emergency, do you wish to be notified? Yes _____ No _____

Phone: _____ C/O Name: _____

If we can't reach you, alternate emergency contact: Yes _____ No _____

Phone: _____ Name: _____

Address: _____

Signed: _____ Date of request: _____



WALLENPAUPACK LAKE ESTATES
Winter Address Change

Do you want your mail to be sent to your winter address? Yes _____ No _____

If yes please provide your address below:

Address _____

City _____ State _____ Zip Code _____

NOTE - You must contact the office when you return, so we can change back to the original address.