

Manasquan Police Department

Vacant House Registration Form

Premise Information

Name:	Telephone No.:
Address:	<input type="checkbox"/> Owner <input type="checkbox"/> Tennant
Date House Vacant:	Return Date:

Location You Can Be Reached In Emergency

Location:	Telephone No.:
Address:	

Vehicles Left At Residence (If Applicable)

Make:	Color:	License Plate & State:
Make:	Color:	License Plate & State:
Make:	Color:	License Plate & State:

Local Emergency Contact(s)

Name:	Telephone No.:
Address:	Has Key: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name:	Telephone No.:
Address:	Has Key: <input type="checkbox"/> Yes <input type="checkbox"/> No

Additional Information

Police Department Use Only

Date Checked	Time	Officer	Comment(s)

Date Notified of Return:	Dispatcher/Officer:
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