

House/Vacation Watch Form - Online

In our efforts to make the community safer and to reduce crime, the Boardman Police Department offers this service free of charge. If requested, we will periodically check the exterior of your home to make sure all doors and windows are secured. We will contact you directly with any questions or concerns that arise.

Instructions: Please complete all sections of this form prior to submission. The information you list on this form will be kept confidential. If there are any changes to the information you provide, after submission, please contact the Boardman Police Department at (541) 481-6071.

Related Links

- [House/Vacation Watch Form](#)

You must have JavaScript enabled to use this form.

First Name

Please enter your first name

Last Name

Please enter your last name

Address

Please enter the physical address of where you want your house or property to be watched

Phone

Best contact number

Email Address

Please enter the email address where you want to be notified in case of an emergency

Reason for request

Please describe the reason you are requesting this watch

Request Made By

Who is making the request

Type of Premises

Type of Premises

☐ Business

☐ Residence

☐ Other

Alarm System

- ☐ Yes
- ☐ No

Monitored by Security Company

Monitored by Security Company

- ☐ Yes
- ☐ No

Key Holder

Name & phone number of the person who can respond if the alarm is activated

Interior Lights

Interior Lights

- ☐ Constant
- ☐ Motion
- ☐ Timer
- ☐ None

What if any lights will be left on

Exterior Lights

Exterior Lights

- ☐ Constant
- ☐ Motion
- ☐ Timer
- ☐ None

What if any exterior lights will be left on

Radio or Television

Radio or Television

- ☐ Constant
- ☐ Motion
- ☐ Timer
- ☐ None

What if any will be left on

Keys left with

Name of the Person keys are left with

Contact Address

Address of person whom keys were left with

Contact Phone

Phone number of whom keys were left with

Vehicle Information

Please describe the vehicles left at residence

Other persons that will have access to the property such as relatives, workers, neighbors, employees

Names of any person you have allowed access to your property

In case of emergency do you wish to be notified

In case of emergency do you wish to be notified

☐ Yes

☐ No

Method of notification

Method of notification

☐ Phone

☐ Email

I request that a security check be made on the listed property from

When to begin security check

and end security checks on

When to end security check

Signature

By placing your name here acts as your official signature for purposes of this form

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Submit