



## VACATION WATCH REQUEST FORM

Resident Name: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Departure Date & Time: \_\_\_\_\_

Return Date & Time: \_\_\_\_\_

Animals on Site:  Yes  No

Description: \_\_\_\_\_

Vehicles:  Yes  No

Description: (Make, Model, Color, License Plate Number)

\_\_\_\_\_  
\_\_\_\_\_

Landscapers / Pool Service Provider:

\_\_\_\_\_  
\_\_\_\_\_

Is Home Alarmed?  Yes  No

Emergency Contact Name(s) and Numbers(s):

1. \_\_\_\_\_ Phone: \_\_\_\_\_

2. \_\_\_\_\_ Phone: \_\_\_\_\_

Other Information:

\_\_\_\_\_  
\_\_\_\_\_

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**\*\* Please contact the Gate Attendant at (916) 677-7941 upon your arrival home. Also, if guests will be staying in your home during your absence, please have them advise the Attendants of their arrival.**