



## Holliston Police Department Vacation Notification Form

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

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

Away: *From:* \_\_\_\_\_ *To:* \_\_\_\_\_

Lights on inside house: *Yes:* \_\_\_\_\_ *No:* \_\_\_\_\_

Number to be reached at: \_\_\_\_\_

House Alarmed: *Yes:* \_\_\_\_\_ *No:* \_\_\_\_\_

Alarm Company: \_\_\_\_\_

### Emergency Contact Information:

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

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

Phone number: \_\_\_\_\_

Keys to residence? *Yes:* \_\_\_\_\_ *No:* \_\_\_\_\_