



POLICE DEPARTMENT

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STANDARD HOUSE CHECK FORM

Assignment number _____

Home Owner: _____ Email: _____

Home Location: _____

Closest Intersection: _____ North South East West

Number of homes from the intersection: 1 2 3 4 5 6 7 8 9 10 More

Which side of the roadway: North South East West

Type of home construction: _____ Color _____

Owners' future/temporary location: _____

Telephone number: () _____ or () _____

Departure Date: _____ Return Date: _____

Are neighbors informed: Yes No

Individuals with keys:

1) _____ Telephone: () _____

2) _____ Telephone: () _____

Lights on Yes No Times: _____

Individuals with permission to be on premises: _____

Parked Vehicles: Yes No

Type/Color _____

Newspapers stopped: Yes No

Mail Stopped: Yes No

Name on Mailbox: Yes No

Dogs: Yes No

Notification on Return: Yes No

Other: _____