

RESIDENTIAL CHECKS	
NAME:	PHONE #:
ADDRESS:	
Date of Departure:	Return Date:
Contact Person/Keyholder:	
Phone Number:	
Alarm Company:	
Make/Colour of Vehicle(s) left at home (in driveway or garage):	
Lights on timers/time/location:	
Other Details:	

It is the responsibility of the homeowner to call the RCMP
Detachment upon his/her return

COPP visual check – COPP members are not required to get out of the vehicle and walk
around the house or check backyards

Date	Time	Comments

