



Adams County Sheriff's Office

Extra Patrol/Vacation Check Form

Date: _____ Vacation Check Extra Patrol

Owner: _____ Phone: _____

Address: _____

Location to be checked: _____

Date to be checked from: _____ until _____

Reason: _____

Vehicles left on property: _____

Animals left on property: _____

Security System: Yes No Lights on Timer: Yes No

Subjects allowed on the property: _____

Contact person: _____ Phone: _____

Sheriff's Office Only

Officer: _____ Date: _____
