

LAS OLAS ISLES HOMEOWNERS VACATION SECURITY INFORMATION FORM

PLEASE FURNISH US WITH THE FOLLOWING INFORMATION AT LEAST 3 DAYS IN ADVANCE OF YOUR DEPARTURE. CALL THE SECURITY PATROL AT (954)260-4044 TO COLLECT THIS FORM.

NAME: _____ HOME PHONE _____

ADDRESS: _____

DATE LEAVING: _____ DATE RETURNING: _____

IN CASE OF EMERGENCY

WHERE CAN YOU BE CONTACTED?: _____

NAME OF ALTERNATE PERSON TO CONTACT: _____

TELEPHONE NUMBER (INCLUDE AREA CODE): _____

ALARM COMPANY NAME: _____

ALARM COMPANY TELEPHONE NUMBER: _____

PLEASE PROVIDE INFORMATION IF SOMEONE HAS A KEY TO YOUR HOUSE:

NAME: _____ PHONE: _____

NAME OF PERSON(S) ALLOWED IN HOUSE / ON PROPERTY: _____

ADDITIONAL COMMENTS: _____

SECURITY USE ONLY

Date received: _____ Dates of property check: _____; _____; _____;

_____;

_____;

_____;