

**INGHAM COUNTY SHERIFF'S OFFICE
PROPERTY CHECK**

Name of Person Requesting Property Check		Property Check Number
Address		Email Address
Home Telephone	Cell Phone	Township
Leave Date		Return Date

Name of Contact Person	
Address	
Telephone	Key <input type="checkbox"/> Yes <input type="checkbox"/> No

Lights	Timer	On	Off
Upstairs	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
Kitchen	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
Living Room	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
Bedroom(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
Basement	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
Garage	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.

Vehicle in Garage	<input type="checkbox"/> Yes <input type="checkbox"/> No	Year		Make	
Vehicle in Driveway	<input type="checkbox"/> Yes <input type="checkbox"/> No	Year		Make	
Dogs on Property	<input type="checkbox"/> Yes <input type="checkbox"/> No	Inside or Outside			

Is Anyone Supposed to be at the Residence	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Day <input type="checkbox"/> Night
Name		
Address		
Telephone		

Remarks

Signature

DATE	TIME	OFFICER(S)	REMARKS