



# VILLAGE OF KEY BISCAIYNE

## Police Department

### WATCH ORDER REQUEST FORM

Case Number: \_\_\_\_\_ (Departmental Use Only)

Beginning Date: \_\_\_\_\_ Time: \_\_\_\_\_ Ending Date: \_\_\_\_\_ Time: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone Where You Are Staying: \_\_\_\_\_  
(If Known)

#### EMERGENCY CONTACT PERSON:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

#### PERSONS AUTHORIZED TO ENTER PROPERTY:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

#### FOLLOWING FEATURES:

Alarm Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Lawn Service: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Day(s): Mon – Tues – Wed – Thu – Fri – Sat – Sun Times: \_\_\_\_\_

Maid Service: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Day(s): Mon – Tues – Wed – Thu – Fri – Sat – Sun Times: \_\_\_\_\_

Pool Service: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Day(s): Mon – Tues – Wed – Thu – Fri – Sat – Sun Times: \_\_\_\_\_

**IMPORTANT DATA:** Vacation [ ] Business Trip [ ] Out of the Country [ ] Pest Control Tenting [ ]

Newspaper stopped [ ] Mail forward [ ] Timers [ ] Lights [ ] Hurricane Shutters [ ]

Pets [ ] Type of Pets: \_\_\_\_\_

#### VEHICLES:

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

#### VESSEL ANCHORED/DOCKED:

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

#### HURRICANE SEASON INFORMATION (Who will secure your property in the event of a hurricane?)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Officer: \_\_\_\_\_

**\*\*\* MAKE SURE WATCH ORDER IS PLACED ON THE LIST \*\*\***