VACATION HOUSE CHECK REQUEST FOR BRANDON RESIDENTS AND PERFORMED BY THE FOND DU LAC COUNTY SHERIFF'S DEPARTMENT

Home Owner		
Address		
Departure Date	Return Date	
Local contact & phone number i	n case of an emergency:	
Name & Phone number of peop	le who will have access to your ho	me:
Lights left on? Or any special inf	ormation/instructions:	
I request the FDL County Sheriff's Depwhen I return. Release of Claim: The Department, it's agents or employees Sheriff's Department, it's agents or encaused by reason of any action or not	e undersigned, being the owner(s) of the s, to make security checks and/or inspec mployees from any and all claims of any	premises. I agree to notify the FDL County Sheriff's Department property described above, to induce the FDL County Sheriff's tions of the property described, do hereby release said FDL County nature whatsoever for any damages caused or claimed to be Sheriff's Department, it's agents or employees in the process of
PROPERTY OWNER SIGNATURE		DATE