Plumsted Township Police Department

House Watch

Last Name	First Name
Address (Number and Street)	
Date Start/Date End	Today's Date
Home Phone	Other Phone
Alarm System Name and Phone Number (if applicable)
Describe Any Vehicles That Will Remain of	on the Property
Name, Address, Phone Number of Other P	Person Having Access to the Home
Name, Address, Phone Number of Alterna	te Person Having Access to the Home
Address and Number Where Very Wish to	he Notified in Case of Emergency (if applicable)

Please fax or e-mail your House Watch form to (609) 758-0123 or cmacreynolds@plumsted.org