

DIRECTORATE OF EMERGENCY SERVICES
HOUSE WATCHING LEAVE REQUEST FORM

Soldier/Dependent Information

Soldier's Full Name and Rank:

Dependent's Full Name:

Address:

Home Telephone	Cell Phone	Email Address

Unit	Unit Address	Unit Phone Number

Date and Time of Departure	Date of Return

Emergency Contact Information

First and Last Name	Address	Telephone Number

Lighting Information

List rooms/locations in or outside of the house when lifts will either be left on or are on a timer or sensor. If on a timer, indicate turn on and shut off times. Please be as specific as possible

Newspapers/Mail Stop Information	Papers Stopped [YES] [NO]	Mail Stopped [YES] [NO]

Authorized Vehicles on Site

Make and Model	Color	Year	Tag# and State

Miscellaneous Information

Will anyone be checking/working on the property (repair people, pet sitters, ext?) Is there any other information we should know? Broken windows? Pets left? (Attach a separate sheet if necessary)

I hereby authorize the DES, Military Police and DA Police to visually inspect the house exterior and interior and take any actions deemed necessary for the protection of my property during my leave. I understand and agree that this is a voluntary, free service and doesn't create a special duty upon the government and will be provided depending upon weather and manpower. Further, I understand that no guarantee is made nor assurance given against loss, theft or damage to property.

**Form is to be Dropped of to BLDG 125 Slater Road, The Military Police Station 72HRS Prior to departing on Leave.
 If you return sooner than indicated, please inform the MP Desk at (915) 568-1236**

Signature of Resident _____

_____ Date