



# Neighborhood Watch Program "House Record"

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

In an emergency, contact me at (phone nos.) \_\_\_\_\_

Cottage Address \_\_\_\_\_ Township \_\_\_\_\_

[On/At/Near] Lake \_\_\_\_\_ [Waterfront? YES NO] Cottage Phone \_\_\_\_\_

Nearest intersection \_\_\_\_\_

At this address I am a: Year-round Resident \_\_\_\_\_ Summer Resident \_\_\_\_\_  
Mostly Weekends \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_ Winter \_\_\_\_\_  
Other (describe) \_\_\_\_\_

**Special conditions at this address:** *(check all that apply and add others)*

Stairs \_\_\_\_\_ Handicap ramp \_\_\_\_\_ Other \_\_\_\_\_

A resident: Uses wheelchair \_\_\_\_\_ Uses oxygen tank \_\_\_\_\_ Is hearing impaired \_\_\_\_\_ Is bed-ridden \_\_\_\_\_

Medications: Location and Dosage: *(use other side if necessary)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pets: *(ex: 2 dogs "Bruno," 4#, barks, bites -- "Rover," 60#, docile, friendly; 1 cat "Abby", shy)*

\_\_\_\_\_

Helpful location descriptors *(eg. fenced property, gated, multiple driveways, security alarm system, multiple entry doors, house not visible from street, no mailbox, sloped property, lots of stairs, winding drive, etc - use back if necessary)*

\_\_\_\_\_  
\_\_\_\_\_

My permanent address: \_\_\_\_\_

My email address: \_\_\_\_\_

Is there a keyholder with permission to access your property?

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

Address \_\_\_\_\_

**\* It is your responsibility to KEEP A COPY of this form and UPDATE it with the Sheriff Dept as needed. \***

Return this form to: Clare County Central Dispatch, 255 W. Main St., Harrison MI 48625